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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF NORTH CAROLINA (NC EXEMPTIONS)	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself				
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
1.	You	r full name				
	your	e the name that is on government-issued	Ariel First name	First name		
	example, your driver's license or passport).		Rosezell Middle name	Middle name		
	Bring your picture identification to your meeting with the trustee.		Moore Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)		
2.		other names you have d in the last 8 years				
		ide your married or den names.				
3.	you num Indi	y the last 4 digits of r Social Security ober or federal vidual Taxpayer utification number	xxx-xx-2864			

Debtor 1 Ariel Rosezell Moore

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.				
	Include trade names and doing business as names	Business name(s)	Business name(s)				
		EINs	EINs				
5.	Where you live		If Debtor 2 lives at a different address:				
		1471 New Castle Road Apt. C2					
		Durham, NC 27704 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Durham					
		County	County				
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6. Why you are choosing		Check one:	Check one:				
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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District When Case number 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor District When Case number Relationship to you District When Case number, if known Debtor District When Case number, if known Case number, if known Debtor District When Case number, if known	or 1 Ariel Rosezell Mo	Case number (if known)					
7. The chapter of the Bankruptcy Code you are choosing to file under choosing the f							
Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7	Tell the Court About						
Chapter 17 Chapter 12 Chapter 12 Chapter 12 Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's office in your local co about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier order. If your attorney is submitting your payment on your behalf, your attorney may pay with cash, cashier order. If your attorney is submitting your payment on your behalf, you attorney may pay with cash, cashier order. If you choose this option, sign and attach the Application for I The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By but is not required to, waive your fee, and may do so only if your income is less than 150% of the offit hat applies to your family size and you are unable to pay the fee in installments). If you choose this cout the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with you count family size and you are unable to pay the fee in installments). If you choose this cout the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with you count family size and you are unable to pay the fee in installments). If you choose this cout the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your cases number No. Yes. District When Case number No Yes. Debtor Relationship to you Debtor Relationship to you District When Case number, if known Debtor Relationship to you District When Case number, if known The Filing Fee waived (Official Form 103B). If you choose this count for the file you in cross the pay in the fee in installments (Official Form 103A). No Yes. Debtor Relationship to you The Filing Fee waived (Official Form 103B) and file it with you or the feet in installments (Official Form 103B). If you choose this count for the feet in installments (Official Form 103B	Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
Chapter 12 Chapter 13 Chapter 13 Chapter 13 Livill pay the entire fee when I file my petition. Please check with the clerk's office in your local co about how you may pay. Typically, if you are paying the fee yourself, you may pay with a credit order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit a pre-printed address. Ineed to pay the fee in installments. If you choose this option, sign and attach the Application for I The Filing Fee in Installments (Official Form 103A). Irequest that my fee be waived (You may request this option only if you are filing for Chapter 7. By but is not required to, waive your fee, and may do so only if your income is less than 150% of the offi that applies to your family size and you are unable to pay the fee in installments). If you choose this out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your bankruptcy within the last 8 years? No.	Chapter 7						
Chapter 13 Chapter 13 Chapter 13 Livill pay the entire fee when I file my petition. Please check with the clerk's office in your local co about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier order. If you articorney is submitting your payment on your behalf, your attorney may pay with a credit a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for I The Filling Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By but is not required to, waive your fee, and may do so only if your income is less than 150% of the offit that applies to your family size and you are unable to pay the fee in installments. If you choose this out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your fleat 8 years? No.							
8. How you will pay the fee							
about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for I The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By but is not required to, waive your fee, and may do so only if your income is less than 150% of the offit that applies to your family size and you are unable to pay the fee in installments). If you choose this to ut the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your 9. Have you filed for bankruptcy within the last 8 years? District When Case number District When Case number District When Case number Pes. Poebtor District When Case number Pes. Poebtor District When Case number, if known Debtor District When Case number, if known Case number, if known Debtor District When Case number, if known							
The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By but is not required to, waive your fee, and may do so only if your income is less than 150% of the offit that applies to your family size and you are unable to pay the fee in installments). If you choose this cout the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your Pes. Postrict When Case number District When Case number No. Are any bankruptcy cases pending or being filed by a spouse who is not filling this case with you, or by a business partner, or by an affiliate? Debtor Debtor Debtor District When Case number, if known Relationship to you Case number, if known District When Case number, if known Case number, if known	How you will pay the fee	re paying the fee yourself, you may pay with cash, cashier's check, or money ayment on your behalf, your attorney may pay with a credit card or check with					
bankruptcy within the last 8 years? Yes. District		n 103A). y request this option only if you are filing for Chapter 7. By law, a judge may, may do so only if your income is less than 150% of the official poverty line a unable to pay the fee in installments). If you choose this option, you must fill					
last 8 years? District							
District When Case number 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you District When Case number, if known Relationship to you District When Case number, if known Relationship to you Case number, if known Debtor Relationship to you District When Case number, if known Relationship to you District When Case number, if known Relationship to you District When Case number, if known							
District When Case number 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you District When Case number, if known Debtor Relationship to you District When Case number, if known Relationship to you District When Case number, if known Debtor Relationship to you District When Case number, if known		When Case number					
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor District When Case number, if known Debtor District When Case number, if known Relationship to you Case number, if known Case number, if known Case number, if known		When Case number					
cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor District When Case number, if known Debtor District When Case number, if known Relationship to you Case number, if known Relationship to you Case number, if known Case number, if known							
filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor District When Case number, if known Debtor District When Case number, if known Relationship to you Case number, if known Relationship to you Case number, if known Case number, if known							
District When Case number, if known Relationship to you District When Case number, if known	filed by a spouse who is not filing this case with you, or by a business partner, or by an						
Debtor Relationship to you District When Case number, if known 11. Do you rent your Go to line 12.		Relationship to you					
District When Case number, if known		_ When Case number, if known					
11. Do you rent your Go to line 12.		Relationship to you					
		_ When Case number, if known					
Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your re	residence?	on judgment against you and do you want to stay in your residence?					
□ No. Go to line 12.							
Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) an bankruptcy petition.		About an Eviction Judgment Against You (Form 101A) and file it with this					

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Deb	otor 1 Ariel Rosezell Mo	ore			Ca	se number (if known)	
Par	t 3: Report About Any Bu	sinesses	You Own	as a Sole Proprie	r		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of bus	ess		
	A sole proprietorship is a						
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	& ZIP Code		
	it to this petition.		Chec	k the appropriate bo	to describe your business:		
				Health Care Busin	ss (as defined in 11 U.S.C. § 10	01(27A))	
				Single Asset Rea	state (as defined in 11 U.S.C. §	§ 101(51B))	
				Stockbroker (as d	ined in 11 U.S.C. § 101(53A))		
				Commodity Broke	as defined in 11 U.S.C. § 101(6	6))	
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation in 11 U.S	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set a deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the in 11 U.S.C. 1116(1)(B).				ment of
	For a definition of small	No.	rami	not filing under Chap	: II.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptc Code.			
		☐ Yes.	I am f	iling under Chapter	and I am a small business del	btor according to the definition in the Bankrupto	cy Code.
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	Property That Needs Immedia	nte Attention	
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?			
	public health or safety? Or do you own any property that needs			diate attention is why is it needed?			
	immediate attention?		necueu,	wity is it fleeded?			
For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs?							
					lumber, Street, City, State & Zip Coo	de	

Debtor 1 Ariel Rosezell Moore Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a

П

mental deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes Disability.

> me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active П military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if anv.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

Disability. My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Ariel Rosezell Moore				Case numbe	Case number (if known)			
Par	t 6: Answer These Quest	ions for Re _l	porting Purposes					
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as individual primarily for a personal, family, or household purpose."					
		1	☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily bu	isiness debts? Business debts are debts stment or through the operation of the bus				
		1	☐ No. Go to line 16c.					
		1	☐ Yes. Go to line 17.					
		16c.	State the type of debts you or	we that are not consumer debts or busines	ss debts			
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapter	7. Go to line 18.				
	Do you estimate that after any exempt			Oo you estimate that after any exempt prop will be available to distribute to unsecured				
	property is excluded and administrative expenses		□ No					
	are paid that funds will be available for	İ	□Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do	■ 1-49		□ 1,000-5,000	☐ 25,001-50,000			
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000	☐ 50,001-100,000			
	owe?	□ 100-199	9	☐ 10,001-25,000	☐ More than100,000			
		200-999	Ð					
19.	How much do you	\$0 - \$50,000		☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		1 - \$100,000	□ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion				
			01 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		□ \$500,00	01 - \$1 million	□ \$100,000,001 - \$500 million	☐ Mote triati \$50 billioti			
20.	How much do you	□ \$0 - \$50	0,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		1 - \$100,000	☐ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion			
			01 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
		□ \$500,00	01 - \$1 million	1 \$100,000,001 - \$500 million	More than \$50 billion			
Par	t7: Sign Below							
For	you	I have exa	mined this petition, and I dec	lare under penalty of perjury that the inform	mation provided is true and correct.			
				, I am aware that I may proceed, if eligible, elief available under each chapter, and I ch				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.							
		bankruptcy 1519, and	understand making a false statement, concealing property, or obtaining money or property by fraud in connection bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 15 15 19, and 3571. (s/ Ariel Rosezell Moore					
		Ariel Ros	sezell Moore of Debtor 1	Signature of Debtor	r 2			
		Executed of		Executed on				
			MM / DD / YYYY	MM	/ DD / YYYY			

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Debtor 1	Ariel Rosezell Moore	
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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Koury L. Hicks for John T. Orcutt Signature of Attorney for Debtor	Date	December 23, 2015 MM / DD / YYYY
Koury L. Hicks for John T. Orcutt		
The Law Offices of John T. Orcutt, PC		
6616-203 Six Forks Road Raleigh, NC 27615		
Number, Street, City, State & ZIP Code Contact phone (919) 847-9750	Email address	postlegal@johnorcutt.com
36204	Email address	postiegar@joinforcutt.com
Bar number & State		

		nation to identify you				
Deb	otor 1	Ariel Rosezell M	Middle Name	Last Name		
	otor 2			Last Name		
	use if, filing)	First Name	Middle Name		MOTIONS	
Offin	ieu States Da	nkruptcy Court for the:	WIDDLE DISTRICT OF N	ORTH CAROLINA (NC EXE	ivir (10N3)	
Cas (if kn	se number				-	Check if this is an amended filing
Sta		of Financial	Affairs for Individ			12/15
info	rmation. If m		, attach a separate sheet to			
Par	t 1: Give D	Details About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	us?			
	☐ Married■ Not mar					
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	st all of the places you	lived in the last 3 years. Do no	ot include where you live nov	v.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
			ver live with a spouse or leg alifornia, Idaho, Louisiana, Ne			
	■ No □ Yes. Ma	ake sure you fill out Sca	hedule H: Your Codebtors (Of	fficial Form 106H).		
Par	t 2 Explai	n the Sources of You	ır Income			
4.	Fill in the total	al amount of income yo	mployment or from operating our received from all jobs and a have income that you receive	all businesses, including part	t-time activities.	endar years?
	□ No ■ Yes. Fill	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$34,031.34	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

				Debtor 1				D	ebtor 2		
					of income that apply.	(befo	ss income ore deductions an usions)		ources of inc neck all that a		Gross income (before deductions and exclusions)
	r last caler nuary 1 to	ndar year: December	31, 2014)	■ Wages bonuses,	s, commissions, tips		\$32,505.2		l Wages, cor onuses, tips	nmissions,	
				☐ Opera	ting a business				Operating a	business	
		dar year be December		■ Wages bonuses,	s, commissions, tips		\$29,021.1		Wages, cor onuses, tips	nmissions,	
				☐ Opera	ting a business				Operating a	business	
	unemploy gambling List each	ment, and cand lottery	ther public by winnings. If y the gross inc	enefit payme ou are filing	ome is taxable. Ex- ents; pensions; rer a joint case and you ach source separa	ntal inco ou have	me; interest; divi income that you	idends; r ı receive	noney collect d together, lis	ed from law at it only onc	suits; royalties; and
				Debtor 1				D	ebtor 2		
					of income pelow	(befo	ss income ore deductions an usions)	S	ources of inc escribe belov		Gross income (before deductions and exclusions)
6.	-	r Debtor 1's	or Debtor	2's debts pr	ore You Filed for imarily consume	r debts	?	dehts ard	a defined in 1	11150 81	01(8) as "incurred by a
		individual	primarily for 90 days bet Go to line List below	a personal, f fore you filed 7. each credito	amily, or househo for bankruptcy, di or to whom you pai	ld purpoid you p	ose." ay any creditor a I of \$6,225* or m	total of	\$6,225* or mone page	ore? ayments and	I the total amount you and alimony. Also, do
		* Subject	not include	e payments t	o an attorney for to and every 3 year	his bank	ruptcy case.	_			
	■ Yes.	Debtor 1	or Debtor 2	or both hav	e primarily consu	ımer de	ebts.				
		■ No.	Go to line	7.							
		□ Yes	include pa	yments for d							nat creditor. Do not t include payments to
	Creditor	's Name an	d Address		Dates of payme	nt	Total amount	_	mount you still owe	Was this	payment for
 Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa corporations of which you are an officer, direct including one for a business you operate as a support and alimony. 				y general par officer, direct	rtners; relatives of or, person in contr	any ger	neral partners; pa wner of 20% or m	artnership nore of th	os of which y eir voting se	ou are a ger curities; and	neral partner; any managing agent,
	■ No □ Yes.	Liet all see	monto to or :	neider							
		Name and	nents to an i Address	nsiuel	Dates of payme	nt	Total amount	_	mount you	Reason f	or this payment
							paid	t	still owe		

Case number (if known)

8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		/ payments or transfer	any property on a	ccount of a d	ebt that benefited a	
	No						
	☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name	
Pa	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures	:				
9.	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.						
	■ No						
	☐ Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of th	e case	
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo		property repossessed, t	foreclosed, garnis	shed, attached	d, seized, or levied?	
	■ No □ Yes. Fill in the information below.						
	Creditor Name and Address	Describe the Prop	erty	Date		Value of the	
		Explain what happ	ened			property	
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment be No Yes. Fill in the details.			nancial institutior	ո, set off any ն	amounts from your	
	Creditor Name and Address	Describe the actio	Describe the action the creditor took			Amoun	
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or		property in the possess	taken		efit of creditors, a	
	■ No						
	☐ Yes						
Pai	t 5: List Certain Gifts and Contributions	;					
13.	Within 2 years before you filed for bankru ■ No	ptcy, did you give any	/ gifts with a total value	e of more than \$60	0 per person	?	
	☐ Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$600 per person	Describe the	gifts	Dates the gi	s you gave ifts	Value	
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity No						
	Yes. Fill in the details for each gift or co						
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		t you contributed	Dates	s you ibuted	Value	
Pai	t 6: List Certain Losses						
انت							

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Ariel Rosezell Moore

Debtor 1	∆riel	Rosezell	Moore

Case number (if known)

	disaster, or gambling?							
	■ No □ Yes. Fill in the details.							
	how the loss occurred	nclude	the amount that inso insurance claims of y.	urance has paid. L	_ist		Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers							
16.	Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or pr Include any attorneys, bankruptcy petition pre	eparin	ig a bankruptcy pe	tition?	-	-		erty to anyone you
	Yes. Fill in the details. Person Who Was Paid		Description and	value of any prop	ortv		Data navment	Amount of
	Address Email or website address Person Who Made the Payment, if Not Yo	u	Description and value transferred	value of any prop	erty		Date payment or transfer was made	payment
17.	Within 1 year before you filed for bankrup promised to help you deal with your credit Do not include any payment or transfer that y	tors o	to make payment			oay o	r transfer any prope	erty to anyone who
	■ No Nes Fill in the details							
	Too. I ill ill the detaile.		Baranin dan an Is				D-1	A
	Person Who Was Paid Address		Description and value transferred	value of any prop	erty		Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have already No	busin made a	ess or financial aff as security (such as	airs? the granting of a s	_			
	Yes. Fill in the details.		Deceription and	talue of	Decer	iha a		Data transfer was
	Person Who Received Transfer Address		Description and v		payme	ents	ny property or received or debts change	Date transfer was made
	Person's relationship to you							
19.	Within 10 years before you filed for bankrubeneficiary? (These are often called asset-p ■ No □ Yes. Fill in the details.			ny property to a s	elf-settle	d tru	st or similar device	of which you are a
	Name of trust		Description and v	value of the propo	erty trans	sferre	ed	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, I	nstrun	nents, Safe Deposi	t Boxes, and Sto	rage Unit	ts		
20.	Within 1 year before you filed for bankrup	tcy, we	ere any financial ac	counts or instru	ments he	eld in	your name, or for y	our benefit, closed,
	sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, ass No					it; sh	ares in banks, cred	lit unions, brokerage
	Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		t 4 digits of ount number	Type of account instrument	t or	clos	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer

Debtor 1	Ariel	Rosezell	Moore

Case number (if known)

21.		you now have, or did you have within 1 year h, or other valuables?	before you filed for bankruptcy, a	ny s	safe deposit box or other deposite	ory for securities,	
		No Yes. Fill in the details.					
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	De	scribe the contents	Do you still have it?	
22.	Hav	ve you stored property in a storage unit or pl	ace other than your home within 1	yea	ar before you filed for bankruptcy		
		No Yes. Fill in the details.					
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	De	scribe the contents	Do you still have it?	
Pai	rt 9:	Identify Property You Hold or Control for	Someone Else				
23.			ne else owns? Include any proper	ty y	ou borrowed from, are storing for	r, or hold in trust	
		No Yes. Fill in the details.					
			Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value	
Pai	t 10:	Give Details About Environmental Information	ation				
For	the	purpose of Part 10, the following definitions	apply:				
	toxi reg Site to o	ic substances, wastes, or material into the a ulations controlling the cleanup of these subsequents any location, facility, or property as own, operate, or utilize it, including disposal cardous material means anything an environ	ir, land, soil, surface water, ground ostances, wastes, or material. defined under any environmental sites. mental law defines as a hazardous	dwa law	ter, or other medium, including s	tatutes or or utilize it or used	
Rep	ort a	all notices, releases, and proceedings that yo	ou know about, regardless of wher	n the	ey occurred.		
24.	Has	any governmental unit notified you that you	ı may be liable or potentially liable	un	der or in violation of an environm	ental law?	
		No Yes. Fill in the details.					
			Governmental unit Address (Number, Street, City, State and ZIP Code)	t	Environmental law, if you know it	Date of notice	
25.	Hav	ve you notified any governmental unit of any	release of hazardous material?				
		No				Do you still have it? ing for, or hold in trust Value Value releases of hazardous or ding statutes or erate, or utilize it or used toxic substance,	
		me of site	Governmental unit	4	Environmental law, if you know it	Date of notice	
Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Vision Number, Street, City, State and ZIP Code) Number, Stree							

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Case number (if known)

26.	Have you been a party i	n any judicial or admin	istrative proceeding under any envi	ronmental law? Include settlement	ts and orders.
	■ No				
	Yes. Fill in the deta	ails.			
	Case Title Case Number		Court or agency Name Address (Number, Street, City,	Nature of the case	Status of the case
	Ohan Datatla Alian	d Varia Brasina a a Ga	State and ZIP Code)		
Pai	rt 11: Give Details Abou	it Your Business or Co	nnections to Any Business		
27.			, did you own a business or have ar	•	any business?
	☐ A sole proprieto	or or self-employed in a	trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a I	imited liability compan	y (LLC) or limited liability partnersh	ip (LLP)	
	☐ A partner in a pa	artnership			
	☐ An officer, direc	tor, or managing execu	utive of a corporation		
	☐ An owner of at I	east 5% of the voting o	or equity securities of a corporation		
	No. None of the ab	ove applies. Go to Par	t 12.		
	☐ Yes. Check all that	apply above and fill in	the details below for each business	S.	
	Business Name	D	escribe the nature of the business	Employer Identification numb	
	Address (Number, Street, City, State an	d ZIP Code) N	ame of accountant or bookkeeper	Do not include Social Securit	ty number or ITIN.
	■ No ■ Yes. Fill in the deta	ails below.			
	Name Address (Number, Street, City, State an		ate Issued		
Pai	rt 12: Sign Below				
are with 18 U	true and correct. I under h a bankruptcy case can U.S.C. §§ 152, 1341, 1519 Ariel Rosezell Moore	stand that making a fal result in fines up to \$2	se statement, concealing property, 50,000, or imprisonment for up to 20	or obtaining money or property by	
	iel Rosezell Moore gnature of Debtor 1		Signature of Debtor 2		
Dat	December 23, 201	5	Date		
Did ■ N	No	ges to Your Statement	of Financial Affairs for Individuals	Filing for Bankruptcy (Official Form	ı 107)?
Did ■ N		someone who is not ar	n attorney to help you fill out bankru	iptcy forms?	
		Attach the Bankrupto	cy Petition Preparer's Notice, Declarati	ion, and Signature (Official Form 119)).

Debtor 1 Ariel Rosezell Moore

Fill in this infor				
Debtor 1	mation to identify your case a	and this filing:		
	Ariel Rosezell Moore			
	First Name	Middle Name Last Name		
Debtor 2 Spouse, if filing)	First Name	Middle Name Last Name		
	ankruptov Court for the: MIDD	LE DISTRICT OF NORTH CAROLINA (NC EXEMP	(SIAOIT)	
Jilled States Do	ankruptcy Court for the. WIDD	LE DISTRICT OF NORTH CAROLINA (NC EXLINE	TIONS)	
Case number _				☐ Check if this is a amended filing
Official Fo	orm 106A/B			
_		.,		4045
	e A/B: Property	List an asset only once. If an asset fits in more than one	Para and a	12/15
ore space is nee	ded, attach a separate sheet to thi	e. If two married people are filing together, both are equa s form. On the top of any additional pages, write your na or Other Real Estate You Own or Have an Interest In		
Do you own or I	have any legal or equitable interes	t in any residence, building, land, or similar property?		
■ No. Go to Pa	rt 2.			
Yes. Where i				
	Your Vehicles			
□ No ■ Yes				
-	Chevrolet	Who has an interest in the property? Check one.	Do not deduct secured clause the amount of any secure	ed claims on Schedule D:
Model:	Cavalier	Debtor 1 only		ed claims on Schedule D:
Model: Year:	Cavalier 2003	■ Debtor 1 only □ Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the	ed claims on Schedule D: ims Secured by Property. Current value of the
Model: Year:	Cavalier 2003 te mileage: 145,000	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clair	ed claims on Schedule D: ims Secured by Property.
Model: Year: Approxima	Cavalier 2003 te mileage: 145,000	■ Debtor 1 only □ Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Model: Year: Approximate Other inform	Cavalier 2003 te mileage: 145,000 mation: IJC52F137337713 ce Policy: MetLife -	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the	ed claims on Schedule D: ims Secured by Property. Current value of the
Model: Year: Approxima Other infor VIN: 1G1 Insurance 8943034	Cavalier 2003 te mileage: 145,000 mation: IJC52F137337713 ce Policy: MetLife -	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property	the amount of any secure Creditors Who Have Clai. Current value of the entire property? \$1,395.00 Do not deduct secured cl.	ed claims on Schedule D: Ims Secured by Property. Current value of the portion you own? \$1,395.00
Model: Year: Approximat Other infort VIN: 1G1 Insuranc 8943034	Cavalier 2003 te mileage: 145,000 mation: IJC52F137337713 ce Policy: MetLife - 710	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)	the amount of any secure Creditors Who Have Clai. Current value of the entire property? \$1,395.00	cd claims on Schedule D: Ims Secured by Property. Current value of the portion you own? \$1,395.00 aims or exemptions. Put ed claims on Schedule D:
Model: Year: Approxima Other infor VIN: 1G1 Insurance 8943034 3.2 Make: Model:	Cavalier 2003 te mileage: 145,000 mation: IJC52F137337713 ce Policy: MetLife - 710 Ford Focus 2014	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one.	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1,395.00 Do not deduct secured clair the amount of any secure	cd claims on Schedule D: Ims Secured by Property. Current value of the portion you own? \$1,395.00 aims or exemptions. Put ed claims on Schedule D:
Model: Year: Approximat Other infort Insurance 8943034 3.2 Make: Model: Year: Approximat	Cavalier 2003 te mileage: 145,000 mation: IJC52F137337713 ce Policy: MetLife - 710 Ford Focus 2014 te mileage: 15,920	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clai. Current value of the entire property? \$1,395.00 Do not deduct secured cl. the amount of any secure Creditors Who Have Clai.	current value of the portion you own? \$1,395.00 aims or exemptions. Put aid claims on Schedule D: ims Secured by Property.
Model: Year: Approximat Other infort VIN: 1G1 Insuranc 8943034 3.2 Make: Model: Year: Approximat Other infort	Cavalier 2003 te mileage: 145,000 mation: IJC52F137337713 ce Policy: MetLife - 710 Ford Focus 2014 te mileage: 15,920 mation:	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. ■ Debtor 1 only □ Debtor 2 only	the amount of any secure Creditors Who Have Clais Current value of the entire property? \$1,395.00 Do not deduct secured clais the amount of any secure Creditors Who Have Clais Current value of the	current value of the portion you own? \$1,395.00 aims or exemptions. Put ad claims on Schedule D: tims Secured by Property. Current value of the portion you own?
Model: Year: Approximat Other infort VIN: 1G1 Insuranc 8943034 3.2 Make: Model: Year: Approximat Other infort VIN: 1FA	Cavalier 2003 te mileage: 145,000 mation: IJC52F137337713 ce Policy: MetLife - 710 Ford Focus 2014 te mileage: 15,920	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clais Current value of the entire property? \$1,395.00 Do not deduct secured clais the amount of any secure Creditors Who Have Clais Current value of the	current value of the portion you own? \$1,395.00 aims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own?

Schedule A/B: Property Official Form 106A/B page 1

Debtor 1	Ariel Roseze	ell Moore	Case number (if known)	
		the portion you own for all of your entries from Part 2 ed for Part 2. Write that number here			\$11,047.00
Part 3: De	escribe Your Perso	nal and Household Items			
	wn or have any l	egal or equitable interest in any of the following items	?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Examp □ No	hold goods and folles: Major appliar	urnishings ices, furniture, linens, china, kitchenware			
_ 103	. Decombe	Household Goods and Furnishings			\$1,800.00
□ No	oles: Televisions a including cell	nd radios; audio, video, stereo, and digital equipment; con phones, cameras, media players, games	nputers, printers, scanners	s; music c	ollections; electronic devices
■ Yes	. Describe	Electronics			\$800.00
		Lieutionius			Ψ000.00
Examp		figurines; paintings, prints, or other artwork; books, picture ons, memorabilia, collectibles	es, or other art objects; sta	amp, coin,	or baseball card collections;
Examp No	nent for sports a bles: Sports, photo musical instri	graphic, exercise, and other hobby equipment; bicycles, p	ool tables, golf clubs, skis	; canoes a	and kayaks; carpentry tools;
■ No		s, shotguns, ammunition, and related equipment			
☐ No	nples: Everyday cl	othes, furs, leather coats, designer wear, shoes, accessor	ies		
■ Yes	. Describe	Clothing			\$500.00
■ No □ Yes 13. Non-fa Exam ■ No □ Yes 14. Any o	ples: Everyday je Describe arm animals ples: Dogs, cats, Describe	welry, costume jewelry, engagement rings, wedding rings, birds, horses	any health aids you did n		old, silver

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De	ebtor 1	Ariel Rosezel	l Moore	e		Case number (if known)	
15						including any entries for pages you have attached	\$3,100.00
Pa	rt 4: Des	scribe Your Financi	al Assets	;			
Do	you ow	n or have any le	gal or e	quitable interes	t in any	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No			•		n a safe deposit box, and on hand when you file your peti	tion
						Cash	\$0.00
	Examp □ No					certificates of deposit; shares in credit unions, brokerage the same institution, list each. Institution name:	e houses, and other similar
			17.1.	Savings		Greater Piedmont Credit Union	\$25.00
			17.2.	Checking		Local Government Federal Credit Union	\$0.00
			17.3.	Savings		Local Government Federal Credit Union	\$25.00
	Examp ■ No	mutual funds, o bles: Bond funds, i	nvestme		brokera	ge firms, money market accounts	
19.		iblicly traded sto int venture	ck and i	interests in inco	orporate	d and unincorporated businesses, including an intere	est in an LLC, partnership,
		Give specific info		about them ne of entity:		% of ownership:	
20.	Negotia	able instruments i	nclude p	ersonal checks,	cashiers	e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.	
	☐ Yes. (Give specific infor		about them ler name:			
21.		nent or pension a les: Interests in IF			k), 403(b)), thrift savings accounts, or other pension or profit-sharin	g plans
	☐ Yes. I	List each account	•	ely. of account:		Institution name:	
22.	Your sl		deposit	s you have made		you may continue service or use from a company c utilities (electric, gas, water), telecommunications comp	anies, or others
						Institution name or individual:	

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De	ebtor 1	Ariel Ros	ezell Moore		Case number	(if known)	
23.	Annuiti	es (A contra	ct for a periodic payment of mone	ey to you, either for life or for	a number of years)		
	■ No □ Yes		Issuer name and description.				
24.	26 U.S.C		cation IRA, in an account in a q 1), 529A(b), and 529(b)(1).	ualified ABLE program, or	under a qualified state t	tuition progra	m.
	■ No □ Yes		Institution name and description	n. Separately file the records	of any interests.11 U.S.C	C. § 521(c):	
25.	Trusts,	equitable o	r future interests in property (o	ther than anything listed i	n line 1), and rights or p	owers exercis	able for your benefit
		Give specific	c information about them				
26.			s, trademarks, trade secrets, ar domain names, websites, procee				
		Give specific	c information about them				
27.			es, and other general intangible permits, exclusive licenses, coop		s, liquor licenses, profession	onal licenses	
		Give specific	c information about them				
M	oney or p	oroperty ow	ed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refu	unds owed t	to you				·
	■ No		information about them, includin	g whether you already filed t	the returns and the tax yea	ars	
29.	Family Examp ■ No		e or lump sum alimony, spousal s	support, child support, maint	enance, divorce settlemer	nt, property set	tlement
	☐ Yes. 0	Give specific	information				
	Examp	les: Unpaid v	meone owes you wages, disability insurance paymo ; unpaid loans you made to some		pay, vacation pay, worke	ers' compensat	ion, Social Security
	■ No □ Yes.	Give specific	c information				
31.	Examp	ts in insurar les: Health, d	nce policies disability, or life insurance; health	savings account (HSA); cre	dit, homeowner's, or rente	er's insurance	
	■ No □ Yes. I	Name the ins	surance company of each policy a	and list its value.			
			Company name:		Beneficiary:		Surrender or refund value:
32.	If you a		perty that is due you from some iciary of a living trust, expect produced produced in the produced produced in the produced produ		policy, or are currently enti	tled to receive	property because
	■ No □ Yes.	Give specific	c information				
33.			d parties, whether or not you h		e a demand for payment	:	
	■ No	.so. / tooldoll	e, employment diopates, insulan	or rights to suc			
	☐ Yes.	Describe ea	ch claim				

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Deb	otor 1	Ariel Rosezell Moore		Case number (if known)	
		contingent and unliquidated claims of every nature, incl	uding counterclaims	of the debtor and rights to	set off claims
	■ No □ Yes.	Describe each claim			
_	Any fin ■ No	ancial assets you did not already list			
	☐ Yes.	Give specific information		_	
36.		he dollar value of all of your entries from Part 4, includinant 4. Write that number here			\$50.00
Part	5: De:	scribe Any Business-Related Property You Own or Have an Intere	est In. List any real estate	e in Part 1.	
		own or have any legal or equitable interest in any business-related	d property?		
		to Part 6.			
	Yes. G	So to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interest	ln.	
46.		own or have any legal or equitable interest in any farm-	or commercial fishing	ng-related property?	
		Go to Part 7.			
	☐ Yes	. Go to line 47.			
					Current value of the portion you own? Do not deduct secured claims or exemptions.
Part	7: De:	scribe All Property You Own or Have an Interest in That You Did I	Not List Above		
_	Examp	have other property of any kind you did not already list oles: Season tickets, country club membership	?		
_	■ No	Cive anguitie information			
_	⊒ res.	Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Part	8: Lis	t the Totals of Each Part of this Form			
55.	Part 1	I: Total real estate, line 2			\$0.00
56.		2: Total vehicles, line 5	\$11,047.00		
57.		3: Total personal and household items, line 15	\$3,100.00		
58. 59.		4: Total financial assets, line 36 5: Total business-related property, line 45	\$50.00 \$0.00		
60. 61.		6: Total farm- and fishing-related property, line 52 7: Total other property not listed, line 54 +	\$0.00 \$0.00		
62.	Total	personal property. Add lines 56 through 61	\$14,197.00	Copy personal property to	tal \$14,197.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$14,197.00

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UNITED STATES BANKRUPTCY COURT FOR THE MIDDLE DISTRICT OF NORTH CAROLINA DURHAM DIVISION

In Re: Ariel Rosezell Moore			Case No.		
Social Security No.: xxx-xx-2864 Address: 1471 Newcastle Road, Apt C2 Durham, 27704		Debtor.		Form 91C ((rev. 1/21/14)
DE The undersigned Debtor hereby of Carolina General Statues, and non interest in each and every item list 1. RESIDENCE EXEMPTION Each debtor can retain an aggree Const. Article X, Section 2)(S	n-bankruptcy federal lav ted, irrespective of the N: REAL OR PERSO regate interest in such p	M FOR I perty as exem w. Undersign actual value c	npt pursuant to 11 U.S. ed Debtor is claiming claimed as exempt. ERTY USED AS A R	C. Sections 522(b)(3)(A),(and intends to claim as exe ESIDENCE OR BURIAL	mpt 100% of Debtor's LPLOT.
Description of Property & Address	Market Value		gage Holder or ien Holder	Amount of Mortgage or Lien	Net Value
			VALUE CI	TOTAL NET VALUE: AIMED AS EXEMPT:	
RESIDENCE EXEMPTION Exception to \$18,500 limit: A to exceed \$60,000 in net valu tenant with rights of survivors and the name of the former co Section 2)(See * below)	An unmarried debtor whe, so long as: (1) the phip and (2) the former c	no is 65 years roperty was poonure of the	ERTY USED AS A F of age or older is entit reviously owned by the e property is deceased	led to retain an aggregate is e debtor as a tenant by the , in which case the debtor m	nterest in property not entireties or as a joint nust specify his/her age
Description of Property & Address	Market Value minus 6%		gage Holder or ien Holder	Amount of Mortgage or Lien	Net Value
Debtor's Age:				TOTAL NET VALUE:	
Name of former co-owner:				AIMED AS EXEMPT: UNT OF EXEMPTION:	

^{*} Note to all interested parties: Notwithstanding the above, in the event that: (1) this concerns a Chapter 13 case filed within 12 months after the dismissal of a prior bankruptcy case, and (2) a creditor has, prior to the filing of this case, taken an "action" as that term is defined in In re: Paschal, 337 B.R. 27 (2006), the debtor(s) do not claim the property as exempt, in which case the above information is provided for the sole purpose of determining compliance as required by 11 U.S.C. 1325(a)(4).

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	Des	scription of Property	& Address		
1.					
2.					
3. MOTOR VEHICLE EXEM (N.C.G.S. § 1C-1601(a)(3))	APTION: Each debtor	can claim an exempt	ion in only <u>on</u>	e vehicle, not to exceed \$3,5	00.00 in net value.
Year, Make, Model, Style of Motor Vehicle	Market Value	Lien Ho	lder	Amount of Lien	Net Value
2003 Chevrolet Cavalier	\$1,395.00	Springleaf		\$3,684.00	\$0.00
				TOTAL NET VALUE:	\$0.00
			VALUE C	LAIMED AS EXEMPT:	\$3,500.00
\$2,000.00 in net value.) (N.C	C.G.S. § 1C-1601(a)(5))	,	1 1	
Description	Market Value	Lien Hold	ler	Amount of Lien	Net Value
				TOTAL NET VALUE:	
			VALUE C	LAIMED AS EXEMPT:	
not to exceed \$5,000.00 in net (N.C.G.S. § 1C-1601(a)(4) & The number of dependents for	t value, <u>plus</u> \$1000.00 in to NC Const., Article X,	net value for each de Section 1)			
Description of Property	Market Value	Lien Hole	der	Amount of Lien	Net Value
Clothing & Personal					\$500.00
Kitchen Appliances					\$200.00
Stove					\$0.00
Refrigerator					\$0.00
					\$0.00
Freezer					
Freezer Washing Machine					\$50.00
Washing Machine					\$50.00
Washing Machine Dryer					\$50.00 \$50.00 \$0.00

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Living Room Furniture	T_{-}							\$500.00
Den Furniture								\$0.00
Bedroom Furniture								\$500.00
Dining Room Furniture								\$500.00
Lawn Furniture								\$0.00
Television								\$400.00
() Stereo () Radio								\$0.00
() VCR () Video Camera								\$0.00
Musical Instruments								\$0.00
() Piano () Organ								\$0.00
Air Conditioner								\$0.00
Paintings or Art								\$0.00
Lawn Mower								\$0.00
Yard Tools								\$0.00
Crops								\$0.00
Recreational Equipment								\$0.00
Computer Equipment								\$400.00
						TOTAL	NET VALUE:	\$3,100.00
					VALUE	CLAIMED	AS EXEMPT:	\$5,000.00
6. LIFE INSURANCE : The	re is no lir	nit on amour	nt or numb	er of policies	. (N.C.G.S.	§ 1C-1601(a	a)(6) & NC Const.	, Article X, Sect. 5)
Description & Compar	nv	Insured		Last 4 Digits of Policy Number		Beneficiary		
2 total priori et compar	-5				of Policy	Number	(If child, u	se initials only)
		<u>. </u>						
7. PROFESSIONALLY PR	ESCRIB	E D HEALT I	Η AIDS: Γ	Debtor or Deb	tor's Depend	ents. (No lin	nit on value.) (N.C	.G.S. § 1C-1601(a)(7))
Description								
8. COMPENSATION FOR OR ANNUITIES, OR COFOR SUPPORT. There is related legal, health or fun	OMPENSA s no limit	ATION FOR on this exem	RTHE DE option. All	ATH OF A F such amount	PERSON UI	PON WHO	M THE DEBTOR	R WAS DEPENDENT
Description			Source	e of Compens	ation			Digits of ount Number

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The Debtor claims an exemption in any possible consumer rights claim only to the extent that the settlement/award is found by the Bankruptcy Court, upon the filing of a Motion for Approval of Settlement/Award and for Allowance of Exemptions and an Amendment to this Schedule C, to be in the nature of a personal injury claim, if allowed as exempt under applicable law, or to the extent that it is found to be other than a personal injury claim only to the extent of the dollar amount available to the Debtor under another exemption, such as the wildcard exemption, under applicable exemptions law. The time within which the trustee may object to the claiming of any exemption in this asset, shall be deemed tolled until such time as the Motion and Amendment are filed and served upon the trustee.

- 9. INDIVIDUAL RETIREMENT PLANS AS DEFINED IN THE INTERNAL REVENUE CODE AND ANY PLAN TREATED IN THE SAME MANNER AS AN INDIVIDUAL RETIREMENT PLAN UNDER THE INTERNAL REVENUE CODE. (N.C.G.S. § 1C-1601(a)(9)) (No limit on number or amount.). Debtor claims an exemption in all such plans, plus all other RETIREMENT FUNDS as defined in 11 U.S.C. Section 522(b)(3)(c).
- 10. **COLLEGE SAVINGS PLANS QUALIFIED UNDER SECTION 529 OF THE INTERNAL REVENUE CODE.** Total net value <u>not</u> to exceed \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, such contributions must have been made in the ordinary course of the debtor's financial affairs <u>and</u> must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses. (N.C.G.S. § 1C-1601(a)(10))

College Savings Plan	Last 4 Digits of Account Number	Initials of Child Beneficiary	Value

XEMPT:

11. **RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENT UNITS OF OTHER STATES.** (The debtor's interest is exempt only to the extent that these benefits are exempt under the law of the State or governmental unit under which the benefit plan is established.) (N.C.G.S. § 1C-1601(a)(11))

Name of Retirement Plan	State or Governmental Unit	Last 4 Digits of Identifying Number	Value

|--|

12. ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor.) (N.C.G.S. § 1C-1601(a)(12))

Type of Support	Location of Funds	Amount

VALUE CLAIMED AS EXEMPT:

13. **WILDCARD EXEMPTION:** Each debtor can retain a total aggregate interest in any other property, not to exceed a net value of \$5,000.00, or the unused portion of the debtor's <u>residence</u> exemption, <u>whichever is less</u>. (N.C.G.S. § 1C-1601(a)(2))

Description of the Property	Market Value	Lien Holder	Amount of Lien	Net Value
Any property owned by the debtor(s), not otherwise claimed as exempt.				\$5,000.00
2014 Ford Focus	\$9,652.00	Car Finance Capital	\$20,869.00	\$0.00

TOTAL NET VALUE:	\$5,000.00
VALUE CLAIMED AS EXEMPT:	\$5,000.00

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14. OTHER EXEMPTIONS CLAIMED UNDER THE LAWS OF THE STATE OF NORTH CAROLINA:

	Amount
Aid to the Aged, Disabled and Families with Dependent Children N.C.G.S. § 108A-36	
Aid to the Blind N.C.G.S. § 111-18	
Yearly Allowance of Surviving Spouse N.C.G.S. § 30-15	
North Carolina Local Government Employees Retirement Benefits N.C.G.S. § 128-31	
North Carolina Teachers and State Employee Retirement Benefits N.C.G.S. § 135-9	
Fireman's and Rescue Workers' Pensions N.C.G.S. § 58-86-90	
Workers Compensation Benefits N.C.G.S. § 97-21	
Unemployment benefits, so long as not commingled and except for debts for necessities purchased while unemployed N.C.G.S. § 96-17	
Group Insurance Proceeds N.C.G.S. § 58-58-165	
Partnership Property, except on a claim against the partnership N.C.G.S. § 59-55	
Wages of Debtor necessary for the support of family N.C.G.S. § 1-362	

|--|

15. EXEMPTIONS CLAIMED UNDER NON-BANKRUPTCY FEDERAL LAW:

	Amount
Foreign Service Retirement and Disability Payments 22 U.S.C. § 4060	
Social Security Benefits 42 U.S.C. § 407	
Injury or death compensation payments from war risk hazards 42 U.S.C. § 1717	
Wages of Fishermen, Seamen and Apprentices, 46 U.S.C. § 11108 &11109	
Civil Service Retirement Benefits 5 U.S.C. § 8346	
Longshoremen and Harbor Workers Compensation Act death and disability benefits 33 U.S.C. § 916	
Railroad Retirement Act annuities and pensions 45 U.S.C. § 231m	
Veteran benefits 38 U.S.C. § 5301	
Special pension paid to winners of Congressional Medal of Honor 38 U.S.C. § 1562	

VALUE CLAIMED AS EXEMPT:	
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UNSWORN DECLARATION UNDER PENALTY OF PERJURY

I, the undersigned Debtor, declares under penalty of perjury that I have read the foregoing document, consisting of 14 paragraphs on consecutive pages, and that they are true and correct to the best of my knowledge, information and belief.

Dated: 12/23/15

s/ Ariel Rosezell Moore
Ariel Rosezell Moore

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UNITED STATES BANKRUPTCY COURT FOR THE MIDDLE DISTRICT OF NORTH CAROLINA DURHAM DIVISION

In Re: Ariel Rosezell Moore		PROPOSED CHAPTER 13 PLAN
Social Security No.: xxx-xx-2864		Case No
Address: 1471 Newcastle Road, Apt C2 Durham, 27704		
	Debtor.	_

The Debtor proposes an initial plan, which is subject to modification, as follows:

This document and the attached **CH. 13 PLAN - DEBTS SHEET (MIDDLE)** shall, together, constitute the proposed plan; and all references herein are to corresponding sections of said attached document. The terms and conditions of this proposed plan shall control and apply except to the extent that they contradict the terms and conditions of the order confirming the Chapter 13 plan entered by this Court in this case:

- 1. Payments to the Trustee: The Debtor proposes to pay to the Trustee from future earnings consecutively monthly payments, for distribution to creditors after payment of costs of administration. See "PROPOSED PLAN PAYMENT" section for amount of monthly payment and the duration. Actual duration will be determined in accordance with the provisions set forth in the Paragraph 2 below.
- 2. <u>Duration of Chapter 13 Plan</u>: at the earlier of, the expiration of the Applicable Commitment Period <u>or</u> the payment to the Trustee of a sum sufficient to pay in full: (A) Allowed administrative priority claims, including specifically the Trustee's commissions and attorneys' fees and expenses ordered by the Court to be paid to the Debtor's Attorney, (B) Allowed secured claims (including but not limited to arrearage claims), excepting those which are scheduled to be paid directly by the Debtor "outside" the plan, (C) Allowed unsecured priority claims, (D) Cosign protect consumer debt claims (only where the Debtor proposes such treatment), (E) Post-petition claims allowed under 11 U.S.C. § 1305, (F) The dividend, if any, required to be paid to non-priority, general unsecured creditors (not including priority unsecured creditors) pursuant to 11 U.S.C. § 1325(b)(1)(B), and (G) Any extra amount necessary to satisfy the "liquidation test" as set forth in 11 U.S.C. § 1325(a)(4).
- 3. Payments made directly to creditors: The Debtor proposes to make regular monthly payments directly to the following creditors: See "RETAIN COLLATERAL & PAY DIRECT OUTSIDE PLAN" section. It shall not be considered a violation of the automatic stay if, after the bankruptcy filing, a secured creditor sends to the Debtor payment coupon books or monthly payment invoices with respect to debts set forth in this section of the plan.
- 4. <u>Disbursements by the Trustee</u>: The Debtor proposes that the Trustee make the following distributions to creditors holding allowed claims, after payment of costs of administration as follows: See "INSIDE PLAN" section. More specifically:
 - a. The following secured creditors shall receive their regular monthly contract payment: See "LTD Retain / DOT on Principal Res./Other Long Term Debts" section. At the end of the plan, the Debtor will resume making payments directly to the creditor on any such debt not paid in full during the life of the plan.
 - b. The following secured creditors shall be paid in full on their arrearage claims over the life of the plan on a pro-rata basis with other secured claims (not including LTD claims): See "**Arrearage Claims**" section.
 - c. The following creditors have partially secured and partially unsecured claims. The secured part of the claim shall be paid in full over the life of the plan on a pro-rata basis with other secured claims (not including LTD claims): See "STD Retain/Secured Debts (Paid at FMV)" and "Secured Taxes" sections.
 - d. The following secured creditors shall be paid in full over the life of the plan on a pro-rata basis with other secured claims (not including LTD claims): See "STD Retain / Secured Debts & 910 Vehicles (Pay 100%)" section.
 - e. The following priority claims shall be paid in full by means of deferred payment: See "Unsecured Priority Debts" section.
 - f. The following co-signed claims shall be paid in full, plus interest at the contract rate, by means of deferred payments: See "Cosign Protect Debts (Pay 100%)" section.
 - g. After payment of allowed costs of administration, priority and secured claims, the balance of the funds paid to the Trustee shall be paid to allowed, general unsecured, non-priority claims. See "General Unsecured Non-Priority Debts" section.
- 5. Property to be surrendered: The Debtor proposes to retain all property serving as collateral for secured claims, except for the following property, which shall be surrendered to the corresponding secured creditor(s): See "SURRENDER COLLATERAL" section. Unless an itemized Proof of Claim for any deficiency is filed within 120 days after confirmation of this plan, said creditor shall not receive any further disbursement from the trustee. Any personal property serving as collateral for a secured claim which is surrendered, either in the confirmation order or by other court order, which the lien holder does not take possession of within 240 days of the entry of such order shall be deemed abandoned and said lien cancelled.

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- 6. **Executory contracts**: The Debtor proposes to assume all executory contracts and leases, except those specifically rejected. See "**REJECTED EXECUTORY CONTRACTS / LEASES**" section.
- 7. Retention of Consumer Rights Causes of Action: Confirmation of this plan shall constitute a finding that the Debtor does not waive, release or discharge but rather retains and reserves for herself and the Chapter 13 Trustee any and all pre-petition claims and any and all post-petition claims that she could or might assert against any party or entity arising under or otherwise related to any state or federal consumer statute or under state or federal common law including but not limited to fraud, misrepresentation, breach of contract, unfair and deceptive acts and practices, retail installment sales act violations, Truth in Lending violations, Home Equity Protection Act violations, Real Estate Settlement Protection Act violations, Fair Debt Collection Practices Act violations, Fair Credit Reporting Act violations, Equal Credit Opportunity Act violations, Fair Credit Billing Act violations, Consumer Leasing Act violations, Federal Garnishment Act violations, Electronic Funds Transfer Act violations, and any and all violations arising out of rights or claims provided for by Title 11 of the United States Code, by the Federal Rules of Bankruptcy Procedure, or by the Local Rules of this Court.
- 8. Standing for Consumer Rights Causes of Action: Confirmation of this plan shall vest in the Debtor full and complete standing to pursue any and all claims against any parties or entities for all rights and causes of action provided for under or arising out of Title 11 of the United States Code including but not limited to the right to pursue claims for the recovery of property of this estate by way of turnover proceedings, the right to recover pre-petition preferences, the right to pursue automatic stay violations, and the right to pursue discharge violations.
- 9. Termination of Liens: Upon the full payment of a secured party's underlying debt determined under non-bankruptcy law or the granting of a discharge pursuant to 11 U.S.C. § 1328, the secured party shall within 10 days after demand and, in any event, within 30 days, execute a release of its security interest on the property securing said claim. In the case of a motor vehicle, said secured creditor shall execute a release on the title thereto in the space provided therefore on the certificate or as the Division of Motor Vehicles prescribes, and mail or deliver the certificate and release to the Debtor or the Debtor's Attorney. Confirmation of this plan shall impose an affirmative and direct duty on each such secured party to comply with the provision and upon failure to so comply. This provision may be enforced in a proceeding filed before the Bankruptcy Court and each such creditor consents to such jurisdiction by failure to file any timely objection to this plan. Such an enforcement proceeding may be filed by the Debtor in this case either before or after the entry of the discharge order and either before or after the closing of this case. The Debtor specifically reserves the right to file a motion to reopen this case under 11 U.S.C. § 350 to pursue the rights and claims provided for herein.
- 10. <u>Jurisdiction for Non-Core Matters</u>: Confirmation of this plan shall constitute the expressed consent by any party in interest in this case, or any one or more of them, including all creditor or other parties duly listed in Schedules D, E, F, G, and H, or any amendments thereto, to the referral of a proceeding related to a case under Title 11 of the United States Code to a Bankruptcy Judge to hear and determine and to enter appropriate orders and judgments as provided for by 28 U.S.C. § 157(c)(2).
- 11. <u>Obligations of Mortgagors</u>: Confirmation of this plan shall impose an affirmative duty on the holders of all claims secured by mortgages or deeds of trust on real property of this estate to:
 - a. Pursuant to 11 U.S.C. § 1326, adequate protection payments shall not be made on allowed secured claims secured by real property prior to confirmation. This provision shall not preclude such a claim-holder from requesting additional adequate protection pursuant to 11 U.S.C. § 362(d);
 - b. Apply any payments received from the Trustee under the plan as the same is designated by the Trustee only to the pre-petition arrears provided for in the confirmed plan;
 - c. Apply any payments received from the Trustee under the plan as the same is designated by the Trustee, that is to either pre-petition interest or pre-petition principal as the case may be;
 - d. Apply all post-petition payments received from the Chapter 13 Trustee under the plan as the same is designated by the Trustee, to the post-petition mortgage obligations of the Debtor for the actual months for which such payments are designated;
 - e. Apply all post-petition payments received directly from the Debtor to the post-petition mortgage obligations due;
 - f. Refrain from the practice of imposing late charges when the only delinquency is attributable to the pre-petition arrears included in the plan;
 - g. Refrain from the imposition of monthly inspection fees or any other type of bankruptcy monitoring fee without prior approval of the Bankruptcy Court after notice and hearing;
 - h. Refrain from the imposition of any legal or paralegal fees or similar charges incurred following confirmation without prior approval of the Bankruptcy Court after notice and hearing;
 - i. Pursuant to 12 U.S.C. § 2609, 15 U.S.C. § 1602, and all other applicable state, federal and contractual requirements, promptly notify the Debtor, the Debtor's Attorney and the Chapter 13 Trustee of any adjustment in the on-going payments for any reason, including, without limitation, changes resulting for Adjustable Rate Mortgages and/or escrow changes. The Debtor specifically agrees that provision of such notice shall not constitute a violation of 11 U.S.C. § 362;
 - j. Pursuant to 11 U.S.C. § 524 and all other applicable state and federal laws, verify, at the request of the Debtor, Debtor's Attorney or Chapter 13 Trustee, that the payments received under the confirmed plan were properly applied;
 - k. Pursuant to N.C.G.S. § 45-91 and all other applicable state, federal and contractual requirements notify the Debtor, the Debtor's Attorney and the Chapter 13 Trustee with notice of the assessment of any fees, charges etc. The Debtor specifically agrees that provision of such notice shall not constitute a violation of 11 U.S.C. § 362; and
 - 1. This provision of this plan may be enforced in a proceeding filed before the Bankruptcy Court and each such secured creditor consents to such jurisdiction by failure to file any timely objection to this plan. Such an enforcement proceeding may be filed by the Debtor in this case either before or after the entry of the discharge order and either before or after the closing of this case. The Debtor specifically reserves the right to file a motion to reopen this case under 11 U.S.C. § 350 to pursue the rights and claims

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herein.

- 12. <u>Arbitration</u>: Acceptance by creditors of payments under this plan and/or failure of any creditor to file an objection to confirmation of the plan herein, constitutes waiver of any right(s) of said creditor(s) to seek enforcement of any arbitration agreement and constitutes consent to the removal of any arbitration clause from any type of contract or contracts with the Debtor herein during the pendency of this case.
- 13. Post-petition tax claims: The Debtor's plan shall provide for full payment of any post-petition tax claim filed by the Internal Revenue Service which are allowed pursuant to 11 U.S.C. § 1305 (b), unless the Internal Revenue Service, after a good faith consideration of the effect such a claim would have on the feasibility of the Debtor's Chapter 13 plan, specifically agrees to a different treatment of such claim. However, any future modification of the Debtor's plan to provide for full payment of any allowed post-petition tax claim shall only occur after the filing of a motion requesting a modification of the plan to that effect.
- 14. Offers in Compromise: The Internal Revenue Service shall, pursuant to I.R.C. §7122 (a) (2002) and 11 U.S.C. §§105 and 525 (a), and notwithstanding any provisions of the Internal Revenue Manual, consider any properly tendered Offer in Compromise by the Debtor. This provision shall not be construed to require the Internal Revenue Service to accept any such Offer in Compromise, but the Internal Revenue Service shall consider such Offer in Compromise as if the Debtor was not in an on-going bankruptcy. In the event that an Offer in Compromise is accepted by the Internal Revenue Service and any tax obligation is reduced, the Chapter 13 Trustee shall review the Chapter 13 payment to determine if a reduction in the plan payment is feasible.
- 15. Adequate Protection Payments: The Debtor proposes that all pre-confirmation adequate protection payments be paid as follows:
 - a. Not later than 30 days after the date of the order for relief, the Debtor shall commence paying directly to the lessor all payments scheduled in a lease of personal property or portion thereof that become due after the said order for relief. Absent a timely objection to confirmation of the proposed plan, it shall be presumed that the Debtor has made such payments as required by 11 U.S.C. § 1326(a)(1)(B) of the Bankruptcy Code.
 - b. All pre-confirmation adequate protection payments required by 11 U.S.C. § 1326(a)(1)(c) payable to a creditor holding an allowed claim secured by personal property, to the extent that the claim is attributable to the purchase of such property by the Debtor shall be disbursed by the Chapter 13 Trustee.
 - c. Each creditor entitled to receive a pre-confirmation adequate protection payment pursuant to 11 U.S.C. § 1326(a)(1)(c) shall be paid each month the amount set forth in the column entitled "Adequate Protection". These amounts shall equal **1.00%** of the FMV of the property securing the corresponding creditor's claim <u>or</u> the monthly amount necessary to amortize the claim (computed at the Trustee's interest rate) over the life of the plan, whichever is less.
 - d. The principal amount of the adequate protection recipient's claim shall be reduced by the amount of the adequate protection payments remitted to the recipient.
 - e. All adequate protection payments disbursed by the Chapter 13 Trustee shall be subject to an administrative fee in favor of the Trustee equal to the Trustee's statutory percentage commission then in effect, and the Trustee shall collect such fee at the time of the distribution of the adequate protection payment to the creditor.
 - f. All adequate protection payments disbursed by the Chapter 13 Trustee shall be made in the ordinary course of the Trustee's business from funds in this case as they become available for distribution.
 - g. No adequate protection payment to a creditor who is listed in the plan as a secured creditor shall be required until a proof of claim is filed by such creditor which complies with Rule 3001 of the Federal Rules of Bankruptcy Procedure.
 - h. The Trustee shall not be required to make pre-confirmation adequate protection payments on account of any claim in which the collateral for such claim is listed in the plan as having a value of less than \$2,000.00.
 - i. The names, addresses and account numbers for each secured creditor entitled to receive a pre-confirmation adequate protection payment as set forth on Schedule D filed in this case are incorporated herein, as if set forth herein at length.
 - Adequate protection payments shall continue until all unpaid Debtor's Attorney's fees are paid in full.

16. Interest on Secured Claims:

- a. Arrearage: No interest shall accrue on any arrearage claim.
- b. Secured Debts Paid at FMV: The lesser of Trustee's interest rate (set pursuant to *In re Till*) and the contract interest rate.
- c. Secured Debts Paid in Full:
 - i. Regarding "910 vehicle" claims: Pursuant to 11 U.S.C. §1322, interest only to the extent that the value, as of the effective date of the plan (hereinafter the "Time Value"), of the motor vehicle exceeds the amount of the claim. The Time Value shall be the total of the payments to amortize the FMV of the motor vehicle, defined as 90% of the N.A.D.A. Retail, at the Trustee's interest rate over the total length of the Chapter 13 plan.
 - ii. All other secured claims: The lesser of the Trustee's interest rate and the contract interest rate.
- 17. <u>Debtor's Attorney's Fees</u>: In the event that the Trustee has, at the time of Confirmation, funds in excess of any amounts necessary to make adequate protection payments to holders of allowed secured claims for personal property, specifically excluding payments for real property due between the filing of the petition and Confirmation, all such funds shall be paid towards unpaid Debtor's Attorney's fees.
- 18. Non-Vesting: Property of the estate shall NOT re-vest in the Debtor upon confirmation of the Chapter 13 plan.
- 19. **Real Estate Taxes** Real estate taxes that are paid by the Debtor through an escrow account as part of any direct mortgage payment, or as part of a conduit payment made by the Trustee, shall continue to be paid by the Debtor through such escrow account and shall be disbursed by the servicer from such escrow account. They shall not be made separately by the Trustee.
- 20. <u>Transfer of Mortgage Servicing</u>: Pursuant to 12 U.S.C. § 2605(f), in the event that the mortgage servicing for any of the Debtor's mortgages is transferred during this case, notice of such transfer of service shall be provided to the Debtor, the Debtor's Attorney and

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the Chapter 13 Trustee within thirty (30) days. Such notice shall include the identity of the new servicer, the address and a toll-free telephone number for the new servicer, instructions on whom to contact with authority regarding such servicing, and the location where the transfer of mortgage servicing is recorded.

- 21. <u>401K Loans</u>: Upon payment in full of a 401K plan loan, the Debtor shall increase Debtor's 401K plan contributions by an amount equal to the amount that was being paid on said 401K loan.
- 22. <u>Non-Disclosure of Personal Information</u>: Pursuant to NCGS 75-66 and other state and federal laws, the Debtor objects to the disclosure of any personal information by any party, including without limitations, all creditors listed in the schedules filed in this case.
- 23. Other provisions of plan (if any): See "OTHER PROVISIONS" section.

Definitions

LTD: Long Term Debt and refers to both: (1) Debts which cannot be modified due to 11 U.S.C. § 1322(b)(2), and (2) Debts where

modification in the plan will not result in a payment lower than the contract payment.

Short Term Debt and refers to debts where the months left on the contract are less than or equal to 60 months.

STD: Short Term Debt and refers to debts where the months left on the contract are less than or equal to Retain: Means the Debtor intends to retain possession and/or ownership of the collateral securing a debt.

910: Means and refers to the purchase money security interest portion of a claim secured by a motor vehicle, where the motor

vehicle was acquired within 910 days before the filing of the bankruptcy case for the personal use of the Debtor.

Sch D #: References the number of the secured debt as listed on Schedule D.

Int. Rate: Means Interest Rate to be paid a secured claim.

Dated: 12/23/15

s/ Ariel Rosezell Moore

Ariel Rosezell Moore

(rev. 1/19/12)

UNITED STATES BANKRUPTCY COURT FOR THE MIDDLE DISTRICT OF NORTH CAROLINA DURHAM DIVISION

In Re: Ariel Rosezell Moore	Case No
Social Security No.: xxx-xx-2864	Chapter 13
Address: 1471 Newcastle Road, Apt C2 Durham, 27704	

Debtor.

Below Median Income Disposable Income Calculation							
CMI Income (Before Marital Adjustment) (Form 22C-1, line 11)	\$ 3,044.31	Schedule I Income Minus Schedule I Expenses (Sch. I, line 12)	\$ 2,226.13				
Minus		(Sen. 1, mic 12)					
Child Support received (1st column) (Sch. I, line 8c)	0.00						
Child Support received (2 nd column) (Sch. I, line 8c)	0.00						
Schedule I expenses (1st column)(Sch. I, line 6)	818.18						
Schedule I expenses (2 nd column)(Sch. I, line 6)	0.00						
Schedule J expenses (Including proposed plan payment) (Sch. J, line 23b)	2,283.33	Schedule J expenses					
Difference between plan payment averaged over 36 months and actual plan payment	341.00	(Including proposed plan payment) (Sch. J, line 23b)	2,283.33				
Equals Means Test Derived Disposable Income:	\$ -398.20	Equals Actual Disposable Income: (Sch. J, line 23c)	\$ -57.20				

(edocs rev. 9/14/15)

	CH. 13 PLAN -	DEBT			Lastnar	Date: 11/2		29 01 64
	RETAIN COLLATERAL &			N			COLLATERAL	
	Creditor Name	Sch D#	Description of C		Credi	tor Name		ion of Collateral
	Creator Name	SCII D #	Description of C	onuterar	Creat	tor runk	Безепри	on or conucrui
in					-			
Retain					_			
	ARREARAGE CLAIMS				REJEC	CTED EXECUTOR	Y CONTRACT	S/L FASES
		G 1 D #	Arrearage	(C 1)				
	Creditor Name	Sch D#	Amount	(See †)	Credi	tor Name	•	on of Collateral
				**	⊩	All Arbitrati	on Provision	S
				**	_			
ain				非非				
Retain				**	_			
				**				
				**				
				水水				
				**				
	LTD - DOT ON PRINCIPAL RE	SIDENCE &	OTHER LONG T	ERM DEB				
	Creditor Name	Sch D#	Monthly Contract Amount	Int. Rate	Adequate Protection	Minimum Equal Payment	Descripti	ion of Collateral
u			Contract Amount	N/A	n/a	Equal I aylıklıt		
Retain				N/A	n/a			
]				N/A	n/a			
				N/A	n/a			
	STD - SECURED DEBTS @ FMV	,						
	Creditor Name	Sch D#	FMV	Int. Rate	Adequate	Minimum	Descripti	ion of Collateral
_	Springleaf		\$1,395	5.25	Protection	Equal Payment \$30.82	2003 Chev	rolet Cavalier
Retain				5.25				
F				5.25				
				5.25				
s	TD - SECURED DEBTS @ 100%							
	Creditor Name	Sch D#	Payoff	Int. Rate	Adequate	Minimum	Descripti	on of Collateral
	Car Finance Capital		Amount \$20,869	5.25	Protection \$97	Equal Payment \$461.04	2014 Ford	
Retain			4-1,000	5.25	***	, , , , , ,		
Ret				5.25				
				5.25				
				5.25				
ATI	ORNEY FEE (Unpaid part)		Amount	P	PROPOSED C	CHAPTER 13	B PLAN PA	YMENT
La	w Offices of John T. Orcutt, P.C.		\$3,700	\$	208	per month for	1	months, then
SEC	CURED TAXES		Secured Amt		200	_		J
IR	S Tax Liens			\$	523	per month for	59	months.
	eal Property Taxes on Retained Real	ty			626			
Re			Amount		Ade	quate Protection Pa	yment Period	
	SECURED PRIORITY DEBTS				Adequate Protectio	on payments shall	14 months of	r until the attorney
UNS	SECURED PRIORITY DEBTS S Taxes							
UNS IR			\$248			r approximately:	fee is pai	d.
IR Sta	S Taxes ate Taxes rsonal Property Taxes		\$248	Codes:	continue fo		ice is pai	d.
IR Sta Pe	S Taxes ate Taxes rsonal Property Taxes imony or Child Support Arrearage			Sch D#	continue for	secued debt as listed	d on Schedule D.	
IR Sta Pe Al	S Taxes ate Taxes rsonal Property Taxes imony or Child Support Arrearage SIGN PROTECT (Pay 100%)	Int.%	\$248 Payoff Amt	Sch D #	continue for	secued debt as listed	d on Schedule D.	
IR Sta Pe Al CO-S	S Taxes ate Taxes rsonal Property Taxes imony or Child Support Arrearage SIGN PROTECT (Pay 100%) Co-Sign Protect Debts (See*)		Payoff Amt	Sch D # Adequa † = May	continue for the earlier of the te Protection = Monthly include up to 3 post-	secued debt as listerally 'Adequate Protect-petition payments.	d on Schedule D.	t.
IR Sta Pe All CO-S	S Taxes ate Taxes rsonal Property Taxes imony or Child Support Arrearage SIGN PROTECT (Pay 100%) Co-Sign Protect Debts (See*) IERAL NON-PRIORITY UNSEC		Payoff Amt Amount**	Sch D # Adequa † = May * Co-sig	continue for the te Protection = Month winclude up to 3 post-gn protect on all debts	secued debt as listed aly 'Adequate Protect petition payments. so designated on th	d on Schedule D. tion' payment am	t.
IR Sta Pe All CO-S	S Taxes ate Taxes rsonal Property Taxes imony or Child Support Arrearage SIGN PROTECT (Pay 100%) Co-Sign Protect Debts (See*)		Payoff Amt	Sch D # Adequa † = May * Co-sig ** = G	continue for the te Protection = Month y include up to 3 post-gn protect on all debts reater of DMI x ACP	secued debt as listed the secued debt as listed petition payments. It is so designated on the or EAE	d on Schedule D. tion' payment am e filed schedules. (Page	t. 4 of 4)
IR Sta Pe All CO-S All CGEN	S Taxes ate Taxes rsonal Property Taxes imony or Child Support Arrearage SIGN PROTECT (Pay 100%) Co-Sign Protect Debts (See*) IERAL NON-PRIORITY UNSEC	URED	Payoff Amt Amount**	Sch D # Adequa † = May * Co-sig ** = G	continue for the te Protection = Month winclude up to 3 post-gn protect on all debts	secued debt as listed the secued debt as listed petition payments. It is so designated on the or EAE	d on Schedule D. tion' payment am e filed schedules. (Page	t. 4 of 4)

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Fill in this informa	ntion to identify you	ur case:				
Debtor 1	Ariel Rosezell N	Moore				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
				(NO EVENDEIONO)		
United States Bank	ruptcy Court for the	: MIDDLE DISTRICT OF NORTH	CAROLINA	(NC EXEMPTIONS)		
Case number (if known)						if this is an ded filing
Official Form	106D					
		Who Have Claims S	Sacurac	l hy Propert	V	12/15
Scriedule L	. Creditors	Wild Have Claims	Jecui ec	by Flopert	у	12/13
		f two married people are filing together, , number the entries, and attach it to thi				
1. Do any creditors ha	ve claims secured by	your property?				
☐ No. Check th	nis box and submit t	this form to the court with your other	schedules. Y	ou have nothing else	to report on this form.	
Yes. Fill in a	II of the information	below.				
Part 1: List All S	Secured Claims					
		nore than one secured claim, list the credit			Column B	Column C Unsecured
		particular claim, list the other creditors in Pater according to the creditor's name.	art 2. As much	Amount of claim Do not deduct the	Value of collateral that supports this	portion
2.1 CarFinance	Capital	Describe the property that secures the	e claim:	value of collateral. \$20,869.00	claim \$9,652.00	If any \$11,217.00
Creditor's Name	Capital	2014 Ford Focus 15,920 mile		Ψ20,000.00	Ψο,σοΣ.σσ	Ψ11,211100
Attn: Manaç 7525 Irvine	ging Agent Center Drive,	VIN: 1FADP3K22EL416723 Insurance Policy: As of the date you file, the claim is: Cr				
Suite 250	2640	apply.	neck all triat			
Irvine, CA 9	ity, State & Zip Code	Contingent				
Number, Street, C	ity, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as m	ortgage or secu	ıred		
Debtor 2 only		car loan)				
Debtor 1 and Debt	•	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
☐ At least one of the☐ Check if this clain		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	Purchase	į		
community debt	in rotates to a	Other (including a right to offset)	Money Security Interest			
	40/05/004					
	12/05/2014 to					
Date debt was incurr		Last 4 digits of account number	er 2079			
2.2 Springleaf I Services	Financial	Describe the property that secures the		\$3,684.00	\$1,395.00	\$2,289.00
Creditor's Name		2003 Chevrolet Cavalier 145,	000			
		miles VIN: 1G1JC52F137337713				
		Insurance Policy: MetLife -				
Attn: Manaç		8943034710 As of the date you file, the claim is: Ch	hock all that			
Post Office		apply.	neck all triat			
	IN 47706-0969 ity, State & Zip Code	☐ Contingent				
Number, Street, C	ny, State & ZIP Code	☐ Unliquidated☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as me	ortgage or secu	ıred		
Debtor 2 only		car loan)				

Official Form 106D

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Debtor 1 Ariel R	osezell Moore		Case	number (if know)	
First Name	Middle N	Name Last Name			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt		☐ Statutory lien (such as tax lien, m☐ Judgment lien from a lawsuit☐ Other (including a right to offset)	Purchase Money Security Interest	_	
Date debt was incurr	06/23/2015 to 11/30/2015	Last 4 digits of account nu	mber 1709		
	ge of your form, add	column A on this page. Write that nur the dollar value totals from all pages		\$24,553.00 \$24,553.00	
Part 2: List Othe	rs to Be Notified f	or a Debt That You Already Liste	ed		
to collect from you for creditor for any of the do not fill out or sub-	or a debt you owe to see debts that you liste mit this page.	e notified about your bankruptcy for someone else, list the creditor in Par d in Part 1, list the additional credito	t 1, and then list the co	llection agency here. Simil	arly, if you have more than one
Name Addr	ess				
Springleaf Post Office	Financial Service	ces ****	On which line in I	Part 1 did you enter t	the creditor?
	, IN 47732-3327		Last 4 digits of ac	count number	

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		Ouse !	10 01007	Doo's Thea	12/20/10	i age	02 01	0-1			
Fill in tl	his informa	tion to identify your	case:								
Debtor '	1	Ariel Rosezell Mo	ore								
20010.	•	First Name	Middle Name	Last	t Name						
Debtor 2 (Spouse if		First Name	Middle Name	Last	t Name						
	. •,	ruptcy Court for the:	MIDDLE DISTRI	CT OF NORTH CA	ROLINA (NC E	XEMPTION	IS)_				
Case nu (if known)	umber								-	if this is a	an
Sche	dule E/	106E/F F: Creditors									12/15
any exect Schedule D: Credito the Continumber (i	utory contrac G: Executor ors Who Have nuation Page if known).	ccurate as possible. Use ts or unexpired leases t y Contracts and Unexpire claims Secured by Proto to this page. If you have	hat could result in a red Leases (Official operty. If more space e no information to r	claim. Also list exec Form 106G). Do not in e is needed, copy the	cutory contracts on nclude any credit Part you need, f	on Schedule tors with par ill it out, nun	A/B: Prontially seconds	perty (Offi cured clain entries in t	icial Form ns that are the boxes	106A/B) a listed in S on the left	nd on Schedule L. Attach
Part 1:	List All c	of Your PRIORITY Un	secured Claims								
1. D	o any credito	ors have priority unsecu	red claims against y	ou?							
	☐ No. Go to F	Part 2.									
	Yes.		16								г., .
ic p	dentify what tylossible, list the	r priority unsecured claim pe of claim it is. If a claim e claims in alphabetical o than one creditor holds a	has both priority and rder according to the	nonpriority amounts, li creditor's name. If you	st that claim here have more than t	and show bo	th priority	and nonpri	iority amou	nts. As mu	ich as
(1	For an explana	ation of each type of claim	, see the instructions	for this form in the ins	truction booklet.)						
						Total claim	1	Priority amount		Nonprior amount	rity
2.1											
	Durham C	County Tax Collect	Or Last 4 digit	s of account number		\$	0.00	\$	0.00	\$	\$0.00
	Priority Credit		When week	the debt income d2		-					
	P.O.Box 3 Durham, I		wnen was i	the debt incurred?				-			
-	Number Stree	et City State Zlp Code	As of the da	ate you file, the claim	is: Check all tha	t apply					
	Who incurre	d the debt? Check one.	☐ Continge	ent							
	Debtor 1 o	only									
	Debtor 2 o	only	☐ Unliquida	ated							
	☐ Debtor 1 a	and Debtor 2 only	☐ Disputed	d							
	☐ At least or	ne of the debtors and ano	ther								
	☐ Check if to	this claim is for a lebt	Type of PRI	IORITY unsecured cla	aim:						
	Is the claim s	subject to offset?	☐ Domesti	c support obligations							
	■ No		■ Taxes a	nd certain other debts	you owe the gove	rnment					
	☐ Yes		☐ Claims fo	or death or personal in	jury while you wer	e intoxicated					
			☐ Other. S	pecify							
				Notic	ce Purposes	Only				-	

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Ariel Rosezell Moore		Ca	ase numbe	r (if know)		
Internal Revenue Service (MD)**	Last 4 digits of account num	nber	\$	0.00 \$	0.00 \$	\$0.0
Priority Creditor's Name Post Office Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred		*	·_	· · · · · · · · · · · · · · · · · · ·	
Number Street City State Zlp Code	As of the date you file, the c	laim is: Check a	ll that apply	•		
Who incurred the debt? Check one.	☐ Contingent					
Debtor 1 only						
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
\square At least one of the debtors and another						
☐ Check if this claim is for a community debt	Type of PRIORITY unsecure	d claim:				
Is the claim subject to offset?	☐ Domestic support obligation	ins				
No	Taxes and certain other de	ebts you owe the	government			
Yes	☐ Claims for death or person	al injury while you	u were intoxi	icated		
	☐ Other. Specify					
	N	otice Purpos	ses Only			
Law Offices of John T. Orcutt	Last 4 digits of account num	ıber	\$	3,700.00 \$	3,700.00 \$	\$0.0
Priority Creditor's Name 6616-203 Six Forks Road Raleigh, NC 27615	When was the debt incurred	2015				
Number Street City State Zlp Code	As of the date you file, the c	laim is: Check a	ll that apply	•		
Who incurred the debt? Check one.	☐ Contingent					
Debtor 1 only	Ŭ					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
lacksquare At least one of the debtors and another						
☐ Check if this claim is for a community debt	Type of PRIORITY unsecure	d claim:				
Is the claim subject to offset?	☐ Domestic support obligation	ins				
■ No	☐ Taxes and certain other de	bts you owe the	government			
Yes	Claims for death or person	al injury while you	u were intoxi	icated		
	Other. Specify	dministrativ	e Expens	ses		

Legal Services Rendered

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Debto	or 1 Ariel Rosezell Moore	Case number (if know)						
2.4	North Carolina Dept. of Revenue** Priority Creditor's Name Post Office Box 1168 Raleigh, NC 27602-1168 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of PRIORITY unsecured claim Domestic support obligations	\$ 2014 : Check all that apply	248.00 \$	248.00 \$	\$0.00		
	■ No	■ Taxes and certain other debts you	u owe the government					
	Yes	☐ Claims for death or personal injur☐ Other. Specify	y while you were intoxicated					
		State I	ncome Taxes					
Part 2	List All of Your NONPRIORITY Unse	ourad Claims						
4.	List all of your nonpriority unsecured claims i unsecured claim, list the creditor separately for eathan one creditor holds a particular claim, list the	ach claim. For each claim listed, ident	ify what type of claim it is. Do	not list claims a	already included in	Part 1. If more		
	Part 2.				Total cl	aim		
4.1	.IMPORTANT NOTICE: Priority Creditor's Name	Last 4 digits of account numb	er		\$	0.00		
	See notice re: creditor claims set forth on Schedule A	When was the debt incurred?						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check all that apply					
	_	☐ Contingent						
	■ Debtor 1 only □ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	ıred claim:					
	\square Check if this claim is for a community debt	☐ Student loans						
	Is the claim subject to offset?	Obligations arising out of a s not report as priority claims	eparation agreement or divo	rce that you did				
	■ No	■ No □ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other. Specify						
4.2	Credit Acceptance	Last 4 digits of account numb	er 633		\$	4,888.00		
	Priority Creditor's Name Attn: Managing Agent 25505 W 12 Mile Road Southfield, MI 48034	When was the debt incurred?	03/08/2008 to 12	/14/2015				
	Number Street City State Zlp Code	As of the date you file, the cla	m is: Check all that apply					

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Debtor '	1 Ariel Rosezell Moore	Case number (if know)					
,	Who incurred the debt? Check one.	☐ Contingent					
	■ Debtor 1 only	G					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed	d aladan.				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did				
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Collect All Po Dispu etc. N	_				
	FedLoan Servicing	Last 4 digits of account number	4FD0	\$	69,844.00		
	Priority Creditor's Name Post Office Box 60610 Harrisburg, PA 17106	When was the debt incurred?	08/24/2015 to 11/30/2015				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	■ Debtor 1 only						
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt	Student loans					
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify					
		Student Loan All Possible Obligations Disputed re: amt, int, fees, ownership etc. NOT ADMITTED					
4.4	GE Capital	Last 4 digits of account number 0134		\$	326.00		
	Priority Creditor's Name c/o Cavalry Portfolio Services 500 Summit Laek Drive Valhalla, NY 10595	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				

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Debtor 1	1 Ariel Rosezell Moore	Case number (if know)					
1	Who incurred the debt? Check one.	☐ Contingent					
	■ Debtor 1 only	g					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORIT	Y unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	Obligations arising not report as priority cla	out of a separation agreement or divorce that you did aims				
	■ No	☐ Debts to pension or	r profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify	Collection Account All Possible Obligations Disputed re: amt, int, fees, ownership, etc. NOT ADMITTED	_			
4.5	Greater Piedmont Credit Union	Last 4 digits of account number		\$	650.00		
	Priority Creditor's Name Post Office Box 1729 Durham, NC 27702	When was the debt in					
-	Number Street City State Zlp Code	As of the date you file	e, the claim is: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	■ Debtor 1 only						
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORIT					
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	Obligations arising not report as priority cla	out of a separation agreement or divorce that you did aims				
	■ No	Debts to pension or	r profit-sharing plans, and other similar debts				
	☐ Yes	Salary Advance Loan All Possible Obligations Disputed re: amt, int, fees, ownership, etc. NOT ADMITTED					
4.6	Lendgreen	Last 4 digits of account number			450.00		
	Priority Creditor's Name Post Office Box 221 Lac Du Flambeau, WI 54538	ncurred? e, the claim is: Check all that apply					
	Number Street City State Zlp Code						

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Debtor	1 Ariel Rosezell Moore			Case number (if know)								
١	Who incurred the debt? Check one.	☐ Contingent										
	Debtor 1 only	— containgont										
	Debtor 2 only	☐ Unliquidated										
	Debtor 1 and Debtor 2 only	Disputed										
	☐ At least one of the debtors and another	Type of NONPRIORITY uns	ecured	I claim:								
	☐ Check if this claim is for a community debt	☐ Student loans										
	Is the claim subject to offset?	Obligations arising out of not report as priority claims	a sepa	ration agreement or divorce that you did								
	■ No	☐ Debts to pension or profit-	Debts to pension or profit-sharing plans, and other similar debts									
	☐ Yes	Other. Specify A D	_									
4.7	Local Government Federal CU **	Last 4 digits of account nur	mber	0708	\$	250.00						
	Priority Creditor's Name Post Office Box 25279 Raleigh, NC 27611-5279	When was the debt incurred	d?	5/22/2015 to 11/30/2015								
	Number Street City State Zlp Code	As of the date you file, the	claim i	s: Check all that apply								
	Who incurred the debt? Check one.	☐ Contingent										
	Debtor 1 only											
	Debtor 2 only	☐ Unliquidated										
	☐ Debtor 1 and Debtor 2 only	☐ Disputed										
	☐ At least one of the debtors and another	Type of NONPRIORITY uns	ecured	l claim:								
	☐ Check if this claim is for a community debt	☐ Student loans										
	Is the claim subject to offset?	☐ Obligations arising out of not report as priority claims	a sepa	ration agreement or divorce that you did								
	No	☐ Debts to pension or profit-	-sharin	g plans, and other similar debts								
	☐ Yes	A Durier: Specify	All Po Dispu	f Credit ssible Obligations ted re: amt, int, fees, ownership, IOT ADMITTED	_							
4.8	Merrick Bank ***	Last 4 digits of account nur	mber	6180	\$	1,345.00						
	Priority Creditor's Name Post Office Box 9201 Old Bethpage, NY 11804-9201	When was the debt incurred	d?	05/16/2012 to 12/11/2014								
	Number Street City State Zlp Code	As of the date you file, the	claim i	s: Check all that apply								

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ebtor 1 Ariel Rose	zell Moore		Case number (if know)									
Who incurred the	e debt? Check one.	☐ Contingent										
■ Debtor 1 only		J										
Debtor 2 only		☐ Unliquidated										
Debtor 1 and [☐ Debtor 1 and Debtor 2 only ☐ Disputed											
☐ At least one of	f the debtors and another	Type of NONPRIORIT	Y unsecured claim:									
☐ Check if this debt	claim is for a community	☐ Student loans										
Is the claim subj	ect to offset?		☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims									
■ No		Debts to pension or	r profit-sharing plans, and other similar debts									
☐ Yes		■ Other. Specify	Credit/Charge Account Purchases All Possible Obligations Disputed re: amt, int, fees, ownership, etc. NOT ADMITTED	_								
Revenue Cyc	le Solutions **	Last 4 digits of accou	int number	\$	35.00							
Priority Creditor's 421 Fayettev Suite 600 Raleigh, NC	ille Street	When was the debt in	icurred?									
Number Street Cit	ty State Zlp Code	As of the date you file	e, the claim is: Check all that apply									
Who incurred the	e debt? Check one.	☐ Contingent										
■ Debtor 1 only												
Debtor 2 only		☐ Unliquidated										
Debtor 1 and [Debtor 2 only	☐ Disputed										
	f the debtors and another	Type of NONPRIORIT	Y unsecured claim:									
☐ Check if this debt	claim is for a community	☐ Student loans										
Is the claim subj	ect to offset?	Obligations arising not report as priority cla	out of a separation agreement or divorce that you did aims									
■ No		Debts to pension or	r profit-sharing plans, and other similar debts									
☐ Yes		■ Other. Specify	Medical Bill Collection Account All Possible Obligations Disputed re: amt, int, fees, ownership, etc. NOT ADMITTED	_								
0 SpotLoan		Last 4 digits of accou	int number	\$	1,310.88							
Priority Creditor's Post Office B Palatine, IL 6	Box 927	When was the debt in	curred?									
Number Street Cit		As of the date you file	e. the claim is: Check all that apply									

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Debtor	1 Ariel Rosezell Moore			Case number (if know)								
Debtoi	Who incurred the debt? Check one.	Contingent										
	■ Debtor 1 only											
	Debtor 2 only	☐ Unliquidated										
	☐ Debtor 1 and Debtor 2 only	Disputed										
	☐ At least one of the debtors and another	Type of NONPRIORITY unse	cured	claim:								
	☐ Check if this claim is for a community debt	☐ Student loans										
	Is the claim subject to offset?	☐ Obligations arising out of a not report as priority claims	sepa	ration agreement or divorce that you did								
	■ No	☐ Debts to pension or profit-s										
	☐ Yes	Al Di	ll Po ispu	ay Loan ssible Obligations ted re: amt, int, fees, ownership, OT ADMITTED								
4.11	Synchrony Bank (Walmart)	Last 4 digits of account num	nber	2031	\$	143.00						
	Priority Creditor's Name Post Office Box 965060 Orlando, FL 32896-5022	When was the debt incurred	l?	11/16/2012 to 10/06/2014								
	Number Street City State Zlp Code	As of the date you file, the cl	As of the date you file, the claim is: Check all that apply									
	Who incurred the debt? Check one.	☐ Contingent										
	■ Debtor 1 only	ū										
	☐ Debtor 2 only	☐ Unliquidated										
	☐ Debtor 1 and Debtor 2 only	☐ Disputed										
	☐ At least one of the debtors and another	Type of NONPRIORITY unse										
	☐ Check if this claim is for a community debt	☐ Student loans										
	Is the claim subject to offset?	☐ Obligations arising out of a not report as priority claims	sepa	ration agreement or divorce that you did								
	■ No	☐ Debts to pension or profit-s	sharin	g plans, and other similar debts								
	☐ Yes	Al Di	II Po ispu	/Charge Account Purchases ssible Obligations ted re: amt, int, fees, ownership, OT ADMITTED	_							
4.12	WebBank (Fingerhut)	Last 4 digits of account num	nber	0267	\$	77.00						
	Priority Creditor's Name Post Office Box 1250 St. Cloud, MN 56395-1250	When was the debt incurred	l?	04/29/2015 to 11/30/2015								
	Number Street City State 7ln Code	As of the date you file the cl	laim i	c. Chack all that apply								

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Debtor 1 Ariel Rosezell Moore		Case number (if know)
Who incurred the debt? Check one.	☐ Contingent	
Debtor 1 only	J	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY ur	nsecured claim:
☐ Check if this claim is for a community debt	☐ Student loans	
Is the claim subject to offset?	☐ Obligations arising out on not report as priority claims	of a separation agreement or divorce that you did
■ No	☐ Debts to pension or pro	fit-sharing plans, and other similar debts
Yes	Other. Specify	Credit/Charge Account Purchases All Possible Obligations
	-	Disputed re: amt, int, fees, ownership, etc. NOT ADMITTED
Part 3: List Others to Be Notified About a D	ebt That You Already Liste	ed
trying to collect from you for a debt you owe to som	eone else, list the original cre- listed in Parts 1 or 2, list the a	ebt that you already listed in Parts 1 or 2. For example, if a collection agency is ditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have additional creditors here. If you do not have additional persons to be notified for
Name Address		t 1 or Part2 did you list the original creditor?
Credit Acceptance Corporation Attn: Managing Agent	Line 4.2 of (Check one)	·
Post Office Box 513		■ Part 2: Creditors with Nonpriority Unsecured Claims
Southfield, MI 48037-0513	Last 4 digits of accou	nt number
Name Address	On which entry in Par	t 1 or Part2 did you list the original creditor?
Credit Acceptance Corporation Silver Triangle Building	Line 4.2 of (Check one)	 Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
25505 W. Twelve Mile Rd, Ste 3000		- Fait 2. Creditors with Nonphority Onsecured Claims
Southfield, MI 48034-8339	Last 4 digits of accou	nt number
Name Address	On which entry in Par	t 1 or Part2 did you list the original creditor?
LVNV Funding, LIC	Line 4.12 of (Check one	<i>*</i>
625 Pilot Road, Sutie 2/3 Las Vegas, NV 89119		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of accou	nt number
Name Address	On which entry in Par	t 1 or Part2 did you list the original creditor?
NC Department of Justice	Line 2.4 of (Check one)	
for NC Department of Revenue Post Office Box 629		☐ Part 2: Creditors with Nonpriority Unsecured Claims
Raleigh, NC 27602-0629		
	Last 4 digits of accou	nt number
Name Address		t 1 or Part2 did you list the original creditor?
Synchrony Bank (Walmart) Post Office Box 965022	Line 4.11 of (Check one	<i>*</i>
Orlando, FL 32896-5022		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of accou	nt number
Name Address		t 1 or Part2 did you list the original creditor?
Synchrony Bank (Walmart) Post Office Box 965023	Line 4.11 of (Check one	•
Orlando, FL 32896-5023		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of accou	nt number
Name Address		t 1 or Part2 did you list the original creditor?
The Honorable Loretta Lynch U.S. Department of Justice	Line 2.2 of (Check one)	Part 1: Creditors with Priority Unsecured Claims

Official Form 106 E/F

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Debtor 1 Ariel Rosezell Moore

Case number (if know)

950 Pennsylvania Ave. NW Washington, DC 20530-0001

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total cla	aim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	248.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	Ψ	
				Ψ	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	3,700.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	3,948.00
				Total Claim	
	6f.	Student loans	6f.	\$	69,844.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	9,474.88
	6j.	Total. Add lines 6f through 6i.	6j.	\$	79,318.88

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Ariel Rosezell Mo	ore		
	First Name	Middle Name	Last Name	-
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	NORTH CAROLINA (NC EXEMPTIONS)	_
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1			· · · · · · · · · · · · · · · · · · ·		
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	City		State	ZIF Code	
2.0	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

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Fill in this	information to identify you	r case:			
Debtor 1	Ariel Rosezell M	oore			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	ng) First Name	Middle Name	Last Name		
United Sta	ites Bankruptcy Court for the:	MIDDLE DISTRICT OF	NORTH CAROLINA (N	IC EXEMPTIONS)	
Case num (if known)	ber				☐ Check if this is an amended filing
	l Form 106H Iule H: Your Cod	lebtors			12/15
people are fill it out, a your name	filing together, both are eq and number the entries in the and case number (if known	ually responsible for supple boxes on the left. Attackn). Answer every question	olying correct informa n the Additional Page	tion. If more space is a to this page. On the to	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
1. Do	you have any codebtors? (I	f you are filing a joint case,	do not list either spous	e as a codebtor.	
■ No □ Yes	S				
	hin the last 8 years, have yo a, California, Idaho, Louisiana				ty states and territories include
	Go to line 3. S. Did your spouse, former spo	ouse, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only	if that person is a guaran	itor or cosigner. Make	sure you have listed t	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	е
	Name			☐ Schedule E/F, I☐ Schedule G, lin	
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, lin	e
	Name			☐ Schedule E/F, I☐ Schedule G, lin	
	Number Street	Chata	71D O- 4-		
	City	State	ZIP Code		

Fill	in this information to	identify your ca	ase:									
De	btor 1	Ariel Roseze	II Moore				_					
	btor 2 ouse, if filing)						_					
Un	ited States Bankrupto	cy Court for the	MIDDLE DISTRICT O EXEMPTIONS)	F NORTH	CAROLINA ((NC	_					
(If k	se number nown)									ed filing nent showi	ng postpetition following date	
<u>O</u>	fficial Form	<u> 1061</u>						Ī	MM / DD/	YYYY		
S	chedule I: Y	our Inco	ome									12/15
spo atta Pa	rt 1: Describe	erated and you to this form. (Employment	are married and not filir r spouse is not filing wi On the top of any additi	ith you, do	not include	infor	mati	ion abou	ut your sp	oouse. If r	nore space is	needed,
1.	Fill in your emplo information.	yment		Debtor 1					Debtor	2 or non-	filing spouse	
	If you have more th		Employment status	■ Emplo	oyed				☐ Emp	loyed		
	attach a separate printer information about a		Employment status	☐ Not e	mployed				□ Not e	employed		
	employers.		Occupation	Patient	Menu Tec	h						
	Include part-time, s self-employed work		Employer's name	Duke R	egional Ho	spita	ıl					
	Occupation may in or homemaker, if it		Employer's address	PO BOX	K 70841 te, NC 282	72						
			How long employed the	here?	Since 200)7			-			
Pa	rt 2: Give Deta	ails About Mon	thly Income									
	imate monthly incor use unless you are so		ate you file this form. If	you have n	othing to rep	ort for	any	line, wri	te \$0 in th	ie space. I	nclude your n	on-filing
	ou or your non-filing s re space, attach a sep		ore than one employer, co	ombine the	information	for all	emp	loyers fo	r that pers	son on the	lines below. I	f you need
								For De	btor 1		ebtor 2 or ling spouse	
2.			ry, and commissions (becalculate what the month			2.	\$	3	3,044.31	\$	N/A	-
3.	Estimate and list	monthly overti	me pay.			3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross Ir	ncome. Add lin	e 2 + line 3			4	\$	3 በ	44 31	\$	N/A	

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Deb	tor 1	Ariel Rosezell Moore		Case	number (if known)		
				For	Debtor 1	For D	Debtor 2 or
						non-1	filing spouse
	Copy	y line 4 here	4.	\$_	3,044.31	\$	N/A
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	351.31	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
	5e.	Insurance	5e.	\$_	124.94	\$	N/A
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
	5g.	Union dues	5g.	\$_	0.00	\$	N/A
	5h.	Other deductions. Specify: Auto Insurance	5h.⊣	+ \$ _	89.37	- \$	N/A
		Health Savings Account	_	\$_	69.24	\$	N/A
		Daycare Reimbursement	_	\$	183.32	\$	N/A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	818.18	\$	N/A
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,226.13	\$	N/A
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		·_		,	
	0.4	settlement, and property settlement.	8c.	\$_	0.00	\$	N/A
	8d. 8e.	Unemployment compensation Social Security	8d. 8e.	\$_ \$	0.00	\$	N/A N/A
	8f.	Other government assistance that you regularly receive	oe.	Ψ_	0.00	Ψ	IN/A
	oi.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A
	80	Pension or retirement income	_	-\$ \$	0.00	\$—	N/A N/A
	8g. 8h.	Other monthly income. Specify:	8g. 8h.⊣	· -		- \$——	N/A N/A
	OII.	other montally moonie. Specify.	_ 011.1	`	0.00		IV/A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
10	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		2,226.13 + \$		N/A = \$ 2,226.13
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ιο. ψ		2,220.13 + Ψ_		- IV/A - Ψ 2,220.13
11.	State Inclu- other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your riferends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not also as the second s	deper				chedule J. 11. +\$0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$ 2,226.13
							Combined monthly income
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?				mondiny moonle
		Yes. Explain:					

Filli	in this information to identify your case:				
Debt	tor 1 Ariel Rosezell Moore		Checl	k if this is:	
				An amended filing	
Debt					wing postpetition chapter
(Spo	ouse, if filing)			13 expenses as or	the following date:
Unite	ed States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH EXEMPTIONS)	CAROLINA (NC	7	MM / DD / YYYY	
	e number				
Of	ficial Form 106J				
Sc	chedule J: Your Expenses				12/1
Be a	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to thin nber (if known). Answer every question.	are filing together, bo is form. On the top of a	th are equa any additio	ally responsible f onal pages, write	or supplying correct your name and case
Part 1.	Describe Your Household Is this a joint case?				
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, Expens	es for Separate Househ	old of Debi	tor 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
				•	□ No
	Do not state the dependents names.	Daughter		5	■ Yes
	dependente names.				■ res
					☐ Yes
					□ No
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes				
Part	2: Estimate Your Ongoing Monthly Expenses				
exp	mate your expenses as of your bankruptcy filing date unless enses as of a date after the bankruptcy is filed. If this is a su licable date.				
the	ude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I</i> icial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	. Include first mortgage	4. \$		624.00
	If not included in line 4:		Ψ		<u> </u>
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		25.00
	4d. Homeowner's association or condominium dues		4d. \$		0.00

0.00

5. Additional mortgage payments for your residence, such as home equity loans

btor 1	Ariel Rosezell Moore	Case num	ber (if known)	
Utili	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	100.00
6b.	Water, sewer, garbage collection	6b.		44.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		0.00
6d.	Other Specify: Call Phone	6d.		100.00
ou.	Cable	ou.	\$	
-			·	129.00
	d and housekeeping supplies	7.		400.00
	dcare and children's education costs	8.		0.00
	hing, laundry, and dry cleaning	9.		50.00
	sonal care products and services	10.	·	61.00
	ical and dental expenses	11.	\$	60.00
	sportation. Include gas, maintenance, bus or train fare.	10	¢	100.00
	not include car payments.	12.	·	
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
	ritable contributions and religious donations	14.	\$	0.00
	rance.			
	not include insurance deducted from your pay or included in lines 4 or 20.	45-	Φ	40.00
	Life insurance	15a.	·	40.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.	·	0.00
	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify: Personal Property Taxes	16.	\$	27.33
. Inst	allment or lease payments:			
	Car payments for Vehicle 1	17a.	\$	0.00
17b	Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as		·	
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spe	cify:	19.		
. Oth	er real property expenses not included in lines 4 or 5 of this form or on Sche	dule I: Y	our Income.	
20a	Mortgages on other property	20a.	\$	0.00
20b	Real estate taxes	20b.	\$	0.00
20c	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	\$	0.00
	er: Specify: Chapter 13 Plan Payment (36 Mth Avg: \$864.00)		+\$	523.00
	culate your monthly expenses		. Ψ	323.00
	Add lines 4 through 21.		s	2,283.33
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	2,203.33
			·	
22C.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,283.33
. Cal	culate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,226.13
	Copy your monthly expenses from line 22c above.	23b.		2,283.33
	177			2,203.00
23c	Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	-57.20
	you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect your medication to the terms of your mortgage?			ase or decrease because of a
modi	, , ,			
	lo.			

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=	in this information to identify your case				
		·			
Det	htor 1 Ariel Rosezell Moore First Name	Middle Name	Last Name		
	otor 2 use if, filling) First Name	Middle Name	Last Name		
	. 0,		NORTH CAROLINA (NC EXEMPTIONS)		
Oill	ed States Bankruptcy Court for the.	DDLL DISTRICT OF	NORTH CAROLINA (NC EXLIVIF HONS)		
	e number			□ Che	ck if this is an
	·			_	ended filing
Of	ficial Form 106Sum				
		l Liabilities aı	nd Certain Statistical Information		12/15
			e are filing together, both are equally responsible the information on this form. If you are filing amen		
you	roriginal forms, you must fill out a new	Summary and ched	ck the box at the top of this page.	ueu scrie	dules after you file
Par	11: Summarize Your Assets				
				Your	assets
					e of what you own
1.	Schedule A/B: Property (Official Form	106A/B)		c	0.00
					0.00
	1b. Copy line 62, Total personal property	, from Schedule A/B		. \$_	14,197.00
	1c. Copy line 63, Total of all property on	Schedule A/B		. \$_	14,197.00
Par	12: Summarize Your Liabilities				
				Vour	liabilities
					unt you owe
2.	Schedule D: Creditors Who Have Claims			•	24 552 00
	2a. Copy the total you listed in Column A	, Amount of claim, at	t the bottom of the last page of Part 1 of Schedule D	\$_	24,553.00
3.	Schedule E/F: Creditors Who Have Unse		al Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>	\$	3,948.00
			claims) from line 6j of Schedule E/F		70 240 00
	Sb. Copy the total claims from Part 2 (fix	onpriority unsecured	ciaims) nom line of or <i>Schedule E/F</i>	,	79,318.88
			Your total liabilities	\$	107,819.88
					107,010.00
Par	13: Summarize Your Income and Exp	enses			
4.	Schedule I: Your Income (Official Form 1	061)			
٦.			e I	\$_	2,226.13
5.	Schedule J: Your Expenses (Official For	m 106J)		¢	2,283.33
	Copy your monthly expenses from line 2	2c of Schedule J		\$_	2,203.33
Par	t 4: Answer These Questions for Adm	ninistrative and Stat	istical Records		
6.	Are you filing for bankruptcy under Ch ☐ No. You have nothing to report on the	•	P Check this box and submit this form to the court with y	our other	schedules.
7.	■ Yes What kind of debt do you have?				
			debts are those "incurred by an individual primarily for 9g for statistical purposes. 28 U.S.C. § 159.	a persor	al, family, or
	Your debts are not primarily cons the court with your other schedules.		ave nothing to report on this part of the form. Check th	is box an	d submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Ariel Rosezell Moore

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,044.31

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	248.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	69,844.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	70,092.00

Fill in th	is informa	ation to identify your	case:			
Debtor 1		Ariel Rosezell Mo	ore			
		First Name	Middle Name	Las	t Name	
Debtor 2 (Spouse if,	-	First Name	Middle Name	Las	t Name	
United S	tates Bank	cruptcy Court for the:	MIDDLE DISTRICT OF	NORTH CA	ROLINA (NC EXEMPTIONS)	
Case nu (if known)	mber					☐ Check if this is an
						amended filing
Officia	l Form	106Dec				
			n Individual	Debto	or's Schedules	12/15
If two ma	arried peo	ple are filing togethe	r, both are equally resp	onsible for s	supplying correct information.	
						tatement, concealing property, or
		or property by fraud ii U.S.C. §§ 152, 1341, 1		ikruptcy cas	e can result in tines up to \$250	,000, or imprisonment for up to 20
	Sign E	Below				
Did	l you pay o	or agree to pay some	one who is NOT an atto	rney to help	you fill out bankruptcy forms?	,
_	No					
_		me of person			Attach Rankruntov Po	etition Preparer's Notice, Declaration,
ш	103. 140				and Signature (Official	
		of perjury, I declare rue and correct.	that I have read the sur	mmary and s	chedules filed with this declara	ation and
v	lal Arial I	Decembly Manya		v		
^ -		Rosezell Moore sezell Moore		X	Signature of Debtor 2	
		of Debtor 1			2.6	
	Date De	ecember 23, 2015			Date	

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of North Carolina (NC Exemptions)

In re	Ariel Rosezell Moore		Case N	o.	
		Debtor(s)	Chapte	r 13	
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR	DEBTOR(S)	
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankrupto	y, or agreed to be p	aid to me, for services re	
	For legal services, I have agreed to accept		\$	3,700.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	3,700.00	
2.	0.00 of the filing fee has been paid.				
3. ′	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. ′	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed comper	nsation with any other perso	on unless they are m	embers and associates of	my law firm.
	☐ I have agreed to share the above-disclosed compensati copy of the agreement, together with a list of the name				aw firm. A
5.	In return for the above-disclosed fee, I have agreed to reno	der legal service for all aspe	cts of the bankrupt	cy case, including:	
1	a. Analysis of the debtor's financial situation, and renderic. Preparation and filing of any petition, schedules, staten Representation of the debtor at the meeting of creditors d. [Other provisions as needed] Exemption planning, Means Test planning or required by Bankruptcy Court local rule	nent of affairs and plan whi s and confirmation hearing, g, and other items if sp	ch may be required and any adjourned	hearings thereof;	
7.]	By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any disc any other adversary proceeding, and any Bankruptcy Court local rule.	hargeability actions, ju	dicial lien avoida		
	Fee also collected, where applicable, incleach, Judgment Search: \$10 each, Credit Class Certification: Usually \$8 each, Use Class: \$10 per session, or paralegal typin	Counseling Certification of computers for Credit	on: Usually \$34 p Counseling brid	er case, Financial Ma fing or Financial Mar	anagement nagment
		CERTIFICATION			
	certify that the foregoing is a complete statement of any a ankruptcy proceeding.	ngreement or arrangement f	or payment to me for	or representation of the de	ebtor(s) in
D	ecember 23, 2015	/s/ Koury L. Hic	ks for John T. O	cutt	
	ate	Koury L. Hicks	for John T. Orcu		
		Signature of Attor The Law Office	<i>ney</i> s of John T. Orc	ıtt, PC	
		6616-203 Six Fo	rks Road	•	
		Raleigh, NC 276	615 Fax: (919) 847-3	/30	
		postlegal@johr		1 33	
		Name of law firm			

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy.fo

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this information to identify your case:						
Debtor 1	Ariel Rosezell Moore	e				
Debtor 2 (Spouse, if filing	g)					
United States E	Sankruptcy Court for the:	Middle District of North Carolina (NC Exemptions)				
Case number (if known)						

Check	cas directed in lines 17 and 21:							
According to the calculations required by this Statement:								
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - Not married. Fill out Column A, lines 2-11.
 - ☐ Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

if you have nothing to report for any line, write wo in the	opaco.					
				Colun Debto		Column B Debtor 2 or non-filing spouse
 Your gross wages, salary, tips, bonuses, overtime all payroll deductions). 	e, and co	mmissi	ons (before	\$	3,044.31	\$
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.					0.00	\$
All amounts from any source which are regularly pof you or your dependents, including child suppofrom an unmarried partner, members of your househout and roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3.	rt. Includ old, your spouse o	le regula depende	r contributions ents, parents,	\$	0.00	\$
. Net income from operating a business, profession, or farm	Debtor	1				
Gross receipts (before all deductions)	\$	0.00				
Ordinary and necessary operating expenses	-\$	0.00				
Net monthly income from a business, profession, or fa	arm \$	0.00	Copy here -> \$	S	0.00	\$
. Net income from rental and other real property	Debtor	1				
Gross receipts (before all deductions)	\$_	0.00				
Ordinary and necessary operating expenses	- \$ _	0.00				
Net monthly income from rental or other real property	\$	0.00	Copy here -> \$	\$	0.00	\$

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

			Ouc	,	known)			
				umn A tor 1		Column B Debtor 2	or	
terest dividends and royalties			\$		0.00	\$	•	
nemployment compensation			\$		0.00	\$		
		efit	_					
· · · · · · · · · · · · · · · · · · ·		.00						
ension or retirement income. Do not include a enefit under the Social Security Act.	any amount received that w	as a	\$		0.00	\$		
o not include any benefits received under the S ceived as a victim of a war crime, a crime again	social Security Act or payments that some net humanity, or internations	ents al or						
			\$		0.00	\$		
			\$		0.00	\$		
Total amounts from separate pages, if a	any.	+	+ \$_		0.00	\$		
		\$	3,044	4.31	+ \$		= \$	3,044.31
							IJĿŢ	
_								tal average nthly income
Determine How to Measure Your Deduc	ctions from Income							
alculate the marital adjustment. Check one:	ı line 11.						\$	3,044.31
	ith you. Fill in 0 below							
_ , ,	•							
Fill in the amount of the income listed in line	e 11, Column B, that was No							
Below, specify the basis for excluding this ir adjustments on a separate page.	ncome and the amount of in	ncome o	devoted	to each p	ourpose	e. If necessa	ry, list add	itional
If this adjustment does not apply, enter 0 be	elow.							
		_ \$ _						
		_ \$ _						
		_ +\$ _						
Total		\$_		0.00	Co	py here=>		0.00
Your current monthly income. Subtract line 1	13 from line 12.						\$	3,044.31
Calculate your current monthly income for the	ne year Follow those store	٠.						
Calculate your current monthly income for the	•						¢	3,044.31
15a. Copy line 14 here=>							\$	3,044.31
							\$	
r ch	not enter the amount if you contend that the adder the Social Security Act. Instead, list it here for you For you spouse Insion or retirement income. Do not include a nefit under the Social Security Act. Come from all other sources not listed above on the include any benefits received under the Social Security Act. Come from all other sources not listed above on the include any benefits received under the Social Security Act. Come from all other sources not listed above on the include any benefits received under the Social Security Act. Come from all other sources not listed above on the include any benefits received under the Social Security Act. Total amounts from separate pages, if a selculate your total average monthly income. The notation of the income from all culate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filling with you are married and your spouse is not filling. Fill in the amount of the income listed in line dependents, such as payment of the spouse Below, specify the basis for excluding this in adjustments on a separate page. If this adjustment does not apply, enter 0 be	nemployment compensation on not enter the amount if you contend that the amount received was a ben der the Social Security Act. Instead, list it here: For you	nemployment compensation on to enter the amount if you contend that the amount received was a benefit der the Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ 0.00 For your spous	protein the amount if you contend that the amount received was a benefit der the Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	property compensation or not enter the amount if you contend that the amount received was a benefit der the Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ ension or retirement income. Do not include any amount received that was a nefit under the Social Security Act. Some from all other sources not listed above. Specify the source and amount. In not include any benefits received under the Social Security Act or payments believed as a victim of a war crime, a crime against humanity, or international or mestic terrorism. If necessary, list other sources on a separate page and put the all below. Total amounts from separate pages, if any. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	proposed to the social Security Act. Instead, list it here: For you \$ 0.00 Tory on tetrement income. Do not include any amount received was a benefit der the Social Security Act. Instead, list it here: For you \$ 0.00 For you spouse \$ 0.00 Inside any amount received that was a nefit under the Social Security Act. For your spouse \$ 0.00 Inside any benefits received under the Social Security Act or payments served as a victim of a war crime, a crime against humanity, or international or mestic terrorism. If necessary, list other sources on a separate page and put the all below. Total amounts from separate pages, if any. Intellect a separate page and put the all below. Determine How to Measure Your Deductions from Income Determine How to Measure Your Deductions from Income Determine How to Measure Your Deductions from Income Propy your total average monthly income from line 11. Includate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filling with you. Fill in 0 below. You are married and your spouse is filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the house dependents, such as payment of the spouse's tax liability or the spouse's support of someone other the Below, specify the basis for excluding this income and the amount of income devoted to each purpose adjustments on a separate page. If this adjustment does not apply, enter 0 below.	perest, dividends, and royaties compeliopyment compensation on on enter the amount if you contend that the amount received was a benefit der the Social Security Act. Instead, list it here: For you	cerest, dividends, and royalties s

Case 15-81387 Doc 1 Filed 12/23/15 Page 58 of 64

Debtor 1	_	Ariel	Rosezell Moore		Case number (if known)		
16. C	alcı	ulate	the median family income that applies to	you. Follow these	steps:		
10	6a. I	Fill in	the state in which you live.	NC	_		
10	6b.	Fill in	the number of people in your household.	2			
10	6c. l	Fill in	the median family income for your state and	size of household.		\$	53,215.00
	•	To fin	d a list of applicable median income amount ctions for this form. This list may also be ava	s, go online using t	the link specified in the separate	*_	
17. H	ow	do th	e lines compare?				
17	7a.		Line 15b is less than or equal to line 16c. 0 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N		· · · · · · · · · · · · · · · · · · ·		
17	7b.		Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc copy your current monthly income from line	ulation of Your Di			
Part 3:		Cal	culate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)		
18. C	ору	/ your	total average monthly income from line 1	1.		\$	3,044.31
C	Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.						
	'		marital adjustment does not apply, fill in 0 or	line 19a.		-\$	0.00
19	9b. \$	Subtr	act line 19a from line 18.			\$	3,044.31
20. C	alcı	ulate	your current monthly income for the year.	Follow these step	OS:		
20	0a.	Сору	line 19b			\$_	3,044.31
		Multip	ly by 12 (the number of months in a year).				(12
20	0b. ⁻	The re	esult is your current monthly income for the y	ear for this part of	the form	\$_	36,531.72
20	0c. (Сору	the median family income for your state and	size of household	from line 16c	\$_	53,215.00
2	1.	How	do the lines compare?				
			ine 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	se ordered by the	court, on the top of page 1 of this form, ch	neck box 3,	The commitment
			Line 20b is more than or equal to line 20c. Uncommitment period is 5 years. Go to Part 4.	nless otherwise ord	dered by the court, on the top of page 1 of	this form, o	check box 4, The

Case 15-81387 Doc 1 Filed 12/23/15 Page 59 of 64

Debtor 1	Ariel Rosezell Moore	Case number (if known)
Part 4:	Sign Below	
Bys	signing here, under penalty of perjury I declare that the info	ormation on this statement and in any attachments is true and correct.
Ar	/ Ariel Rosezell Moore riel Rosezell Moore gnature of Debtor 1	
Date	December 23, 2015 MM / DD / YYYY	
If yo	ou checked 17a, do NOT fill out or file Form 122C-2.	
If yo	ou checked 17b, fill out Form 122C-2 and file it with this for	m. On line 39 of that form, copy your current monthly income from line 14 above.

North Carolina Employment Security Commission Post Office Box 26504 Raleigh, NC 27611

NC Child Support Centralized Collections Post Office Box 900006 Raleigh, NC 27675-9006

Equifax Information Systems LLC P.O. Box 740241 Atlanta, GA 30374-0241

Experian P.O. Box 2002 Allen, TX 75013-2002

Trans Union Corporation P.O. Box 2000 Crum Lynne, PA 19022-2000

Internal Revenue Service (MD) **
Post Office Box 7346
Philadelphia, PA 19101-7346

US Attorney's Office (MD)**
101 S. Edgeworth Street, 4th floor
Greensboro, NC 27401

CarFinance Capital Attn: Managing Agent 7525 Irvine Center Drive, Suite 250 Irvine, CA 92610

Credit Acceptance Attn: Managing Agent 25505 W 12 Mile Road Southfield, MI 48034

Credit Acceptance Corporation Attn: Managing Agent Post Office Box 513 Southfield, MI 48037-0513 Credit Acceptance Corporation Silver Triangle Building 25505 W. Twelve Mile Rd, Ste 3000 Southfield, MI 48034-8339

Durham County Tax Collector P.O.Box 3397 Durham, NC 27702

FedLoan Servicing Post Office Box 60610 Harrisburg, PA 17106

GE Capital c/o Cavalry Portfolio Services 500 Summit Laek Drive Valhalla, NY 10595

Greater Piedmont Credit Union Post Office Box 1729
Durham, NC 27702

Internal Revenue Service (MD)**
Post Office Box 7346
Philadelphia, PA 19101-7346

Law Offices of John T. Orcutt 6616-203 Six Forks Road Raleigh, NC 27615

Lendgreen
Post Office Box 221
Lac Du Flambeau, WI 54538

Local Government Federal CU ** Post Office Box 25279 Raleigh, NC 27611-5279

LVNV Funding, LlC 625 Pilot Road, Sutie 2/3 Las Vegas, NV 89119

Merrick Bank ***
Post Office Box 9201
Old Bethpage, NY 11804-9201

NC Child Support Centralized Collections Post Office Box 900006 Raleigh, NC 27675-9006

NC Department of Justice for NC Department of Revenue Post Office Box 629 Raleigh, NC 27602-0629

North Carolina Dept. of Revenue** Post Office Box 1168 Raleigh, NC 27602-1168

Revenue Cycle Solutions **
421 Fayetteville Street
Suite 600
Raleigh, NC 27601

SpotLoan
Post Office Box 927
Palatine, IL 60078-0927

Springleaf Financial Services Attn: Managing Agent Post Office Box 969 Evansville, IN 47706-0969

Springleaf Financial Services ****
Post Office Box 3327
Evansville, IN 47732-3327

Synchrony Bank (Walmart) Post Office Box 965060 Orlando, FL 32896-5022

Synchrony Bank (Walmart) Post Office Box 965022 Orlando, FL 32896-5022

Synchrony Bank (Walmart) Post Office Box 965023 Orlando, FL 32896-5023 The Honorable Loretta Lynch U.S. Department of Justice 950 Pennsylvania Ave. NW Washington, DC 20530-0001

WebBank (Fingerhut)
Post Office Box 1250
St. Cloud, MN 56395-1250

United States Bankruptcy Court Middle District of North Carolina (NC Exemptions)

	Milu	die District of North Caronna (NC Ex	empuons)	
re	Ariel Rosezell Moore		Case No.	
		Debtor(s)	Chapter	13
	VERI	FICATION OF CREDITOR I	MATRIX	
ab	ove-named Debtor hereby verifies the	hat the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
ate:	December 23, 2015	/s/ Ariel Rosezell Moore		
		Arial Rosezell Moore		

Signature of Debtor